



Medicare Supplement Insurance Premium Rate Comparison

A Guide for South Carolina

In November 1990, Congress passed legislation, which required all states to adopt regulations standardizing Medicare supplement insurance policies. As a result, effective May 1, 1992, South Carolina regulation now requires that all Medicare supplement insurance be sold only in ten standard benefit packages. The basic plan, Plan A, consists of a core benefit package and must be made available by all Medicare supplement insurers. The other nine plans, Plans B through J, consist of the core benefits plus a variety of additional benefits and may or may not be offered by every company. A summary of the benefits of each of the ten standard plans is attached. For additional information, you should consult the "Guide to Health Insurance for People with Medicare" which is available from the insurance company or from the Federal Government.

In July 1995, Congress allowed "Medicare SELECT" products to be marketed in South Carolina. Medicare SELECT policy is the same as a standard Medicare supplement insurance policy in nearly all respects because you are really buying one of the ten standard Medicare supplement plans A through J.

The only difference is that under Medicare SELECT, each insurer has preferred providers, that you must use, except in an emergency, in order to be eligible for full benefits.

Benefits are not usually payable if you do not use preferred providers for non-emergency situations. Medicare, however, will pay its share of approved charges regardless of the provider you choose. You will generally see lower premiums under these policies due to the preferred provider arrangements. You may opt at any time to return to a standard Medicare Supplement insurance policy provided that one is available through your insurance company. Otherwise, you can apply with another insurance company and you will be given credit for time served under the prior policy, i.e., the time will count toward the pre-existing condition limitation under your new policy.



In 2005, two new Medicare supplement plans were introduced, Plan K and Plan L. They will have additional benefits which differ from those found in Medigap Plans A through J. You will pay part of the cost-sharing of some covered services until you meet the annual out-of-pocket

limit of \$4,000 for Plan K, or \$2,000 for Plan L. Please note, however, that the Part B deductible does not apply to the out-of-pocket limit.

What is Open Enrollment?

Beginning on the first day of the month in which you and/or your spouse are both age 65 or older and enrolled in Medicare Part B, you will have an open enrollment period for purchasing Medicare supplement insurance, which will last for six months. During this time, you may not be turned down for Medicare supplement insurance on account of your health. The insurer may, however, exclude pre-existing health conditions for up to six months. Since you have only a limited open enrollment period, it is very important that you understand and take advantage of it.

Medigap Rights and Protections (Guaranteed Issue Rights)

In some situations, you have the right to buy a Medigap policy outside of your Medigap open enrollment period. These rights are called "Medigap protections." They are also called guaranteed issue rights because the law says that insurance companies must sell you a Medigap policy.

In these situations, an insurance company:

- Cannot deny you Medigap coverage or place conditions on a policy (like making you wait for coverage to start),
- Must cover you for all pre-existing conditions, and
- Cannot charge you more for a policy because of past or present

health problems.

In many cases, these rights also apply when your health care coverage changes. Remember, it is best not to wait until your current health coverage has almost ended before you apply for a Medigap policy. You can apply for a Medigap policy early (for example, while you are still in your health care plan) and choose to start your Medigap coverage the day after your health care plan coverage ends. This will prevent gaps in your health coverage.

In many of these instances, you have the right to buy Medigap plan A, B, C, or F from any insurance company who sells Medigap policies in South Carolina (If you are under age 65, you can only purchase a policy from a company who sells Medigap policies to persons under 65 and on Medicare). You can buy the policy at the best premium price available, with no review of your medical records even if you have health problems.

Issue Age or Attained Age Premium

There are two types of premium schedules which insurers generally use. Under an issue age



schedule, the insurer charges a premium based on your age when your policy was first issued. Although your premium will likely increase due to inflation and changes in benefits provided

by Medicare (and therefore changes in benefits of the Medicare supplement), the insurer cannot increase your premium simply because you have gotten older.

Under an attained age schedule, the insurer charges a premium based on your age on each premium due date. With this type of schedule, your premium is not only likely to increase due to



inflation and changes in benefits provided by Medicare, but also because you have gotten older.

How to Use this Premium Comparison

The attached charts compare annual premium rates for plans, which have been approved for sale in South Carolina. The first column gives the name, address, and telephone number of each insurer offering Medicare supplement insurance in this state and may also contain additional notes of clarification. The next two columns indicate the ages for which premiums are shown. If the age is shown under the column titled "Issue Age," then the premiums are charged on an issue age basis. If the age is shown under the column titled "Attained Age," then the premiums are charged on an

attained age basis. These columns may also be used to distinguish "male" rates and "female" rates, "individual" plans and "group" plans, "agent" solicited and "direct" response sales, "non-smoker" rates and "smoker" rates, etc. The final ten columns contain the annual premium rates for the plans that have been approved for each company. When reviewing these rates, you should keep in mind the following points:

- The premiums shown are those which have been approved by and are on file with the South Carolina Department of Insurance as of the date indicated at the top of the chart. These premiums are subject to change and may increase whenever Medicare benefits change or as a result of increasing health care costs.
- Premiums for all ages may not be shown, particularly for plans with attained age rates. For information on ages not shown, you should contact a representative of the company.
- Although annual premiums are shown, most insurers also offer more frequent methods of payment such as monthly or quarterly. For information regarding other methods of payment, you should contact a representative of the company.
- The period during which pre-existing health conditions will not be covered will vary by company. However, pre-existing conditions may not be excluded for more than six months. For more information regarding any of the plans offered by a particular insurer, you should contact a representative of the company. If you have general

questions regarding Medicare Supplement insurance or regarding this premium comparison, you may contact us at:

Consumer Services

South Carolina Department of Insurance

**Post Office Box 100105
Columbia, SC 29202-3105**

Telephone: (803) 737-6180 in state, outside Columbia: 1 (800) 768-3467.

In addition, counseling services are available to provide advice concerning your purchase of Medicare supplement insurance and concerning Medicaid. This service is provided without charge. For information regarding counseling services, you may contact:

**Project I-CARE
Office of the Lieutenant Governor
Office on Aging
1301 Gervais Street, Suite 200
Columbia, SC 29201**

Telephone: (803) 734-9900 or (800) 868-9095.

More information about selecting a Medicare supplement (Medigap) policy is available in the Guide To Health Insurance For People With Medicare, "Choosing a Medigap Policy."

To obtain your free copy, please call 1-800-633-4227. For hearing and speech impaired, call TTY/TDD at 1-877-486-2048. Ask for publication CMS 02110. Please allow 3 weeks for delivery. You may also access information about Medicare on the federal website, www.Medicare.gov.

Now Available in South Carolina:

Guaranteed Medigap Coverage for People Under 65.

Due to Legislative changes, effective January 1, 2003, South Carolina has two guaranteed issue Medigap policies for persons under age 65 and on Medicare due to disability.

Two plans are offered- Plan A and Plan C. Coverage will be through the South Carolina Health Insurance Pool (SCHIP).

The costs of the plans are:

A = \$372.81 a month (all ages) *

C = \$468.81 a month (all ages) *

To obtain more information about SCHIP, please call 1-800-868-2500 x46401 (or 788-0222 x46401 in Columbia). You will reach Blue Cross Blue Shield of South Carolina. SCHIP is not a Blue Cross Blue Shield of South Carolina policy. SCHIP is a state program for which Blue Cross Blue Shield of South Carolina handles the administration.

***Prices correct as of 1/01/06**

DISCLAIMER

This guide has been prepared from premium rate information supplied by insurers to the Department based upon a survey of approved annual premium rates.

If premium rate information for your company is not listed, a response was not provided and you should contact your insurer at their telephone number.

STANDARD MEDICARE SUPPLEMENT BENEFIT PLANS

Includes 2006 deductibles

CORE BENEFITS	A	B	C	D	E	F	G	H	I	J	K	L
Part A Hospital (Days 61-90)	X	X	X	X	X	X	X	X	X	X	X	X
Lifetime Reserve (Days 91-150)	X	X	X	X	X	X	X	X	X	X	X	X
365 Life Hosp. Days-100%	X	X	X	X	X	X	X	X	X	X	X	X
Parts A and B Blood	X	X	X	X	X	X	X	X	X	X	50% *	75% *
ADDITIONAL BENEFITS	A	B	C	D	E	F	G	H	I	J	K	L
Skilled Nursing Facility Coinsurance (Days 21-100) (\$119 per day)			X	X	X	X	X	X	X	X	50% *	75% *
Part A Deductible (\$952)		X	X	X	X	X	X	X	X	X	50% *	75% *
Part B Deductible (\$124)			X			X				X		
Part B Excess Charges						100%	80%		100%	100%		
Foreign Travel Emergency			X	X	X	X	X	X	X	X		
At-Home Recovery				X			X		X	X		
Preventive Medical Care					X					X	100% after Part B deductible	100% after Part B deductible
Hospice Care											50% *	75% *
Cost sharing limit *											\$4000	\$2000

* The out-of-pocket amounts for the items shown with asterisks will go towards the cost-sharing limit. **PLEASE NOTE:** The Part B deductible does not apply to the out-of-pocket limit.

Core Benefits

These benefits pay the patient's share of Medicare's approved amount for physician services (generally 20%) after \$124 annual deductible, the patient's cost of a long hospital stay (\$219/day for days 61-90, \$438/day for days 91-150, approved costs not paid by Medicare after day 150 to a total of 365 days lifetime), and charges for the first 3 pints of blood not covered by Medicare.

Some people who had Plans H, I and J may be able to continue them. Plans H, I and J are not being sold after December 31, 2005. Their benefits are:

A "basic" benefit with \$250 annual deductible, 50% coinsurance and a

- \$1,250 maximum annual benefit (Plans H and I on the chart), and
- An "extended" benefit (Plan J on the chart) containing a \$250 annual deductible, 50% coinsurance and a \$3,000 maximum annual benefit.

High Deductible Option

Insurance companies may offer a high deductible on Plans F and J. If you choose this option, you must pay a \$1,790 deductible* per year before the plan pays anything.

The monthly premium for Medigap Plan F with high deductible option will generally be less than the monthly premium for Plan F without a high

deductible option. However, your out-of-pocket costs for services may be higher if you need to see your doctor or go to the hospital. In addition to the \$1,790 deductible that you must pay for the high deductible option on Plan F, you must pay a deductible for foreign travel emergency (\$250 per year for high deductible Plan F).

(*The amount may go up each year.)



**MEDICARE SUPPLEMENT INSURANCE
ANNUAL PREMIUM RATES AS OF JANUARY 1, 2006
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COMPANY NAME	ISSUE	ATTAINED							HIGH DEDUCTIBLE					HIGH DEDUCTIBLE		
	AGE	AGE	PLAN A	PLAN B	PLAN C	PLAN D	PLAN E	PLAN F	PLAN F	PLAN G	PLAN H	PLAN I	PLAN J	PLAN J	PLAN K	PLAN L
1. AMERICAN PIONEER LIFE INS CO	Standard	65	\$1,281.86	\$1,812.62	\$2,241.25	\$1,902.76	----	\$2,325.37	----	\$1,485.38	----	----	----	----	----	----
1001 Heathrow Park Lane, Ste 5001	Non-Smoker	70	1,498.17	2,141.10	2,589.75	2,253.26	----	2,687.89	----	1,825.56	----	----	----	----	----	----
Lake Mary, FL 32746	Smoker	75	1,720.49	2,503.63	2,982.32	2,633.81	----	3,096.48	----	2,152.92	----	----	----	----	----	----
Tel. No. (407) 995-8000	Male	80	1,858.69	2,751.98	3,258.72	2,900.20	----	3,378.89	----	2,409.22	----	----	----	----	----	----
(800) 538-1053		85	1,934.80	2,906.21	3,438.98	3,068.44	----	3,563.16	----	2,614.26	----	----	----	----	----	----
Notes:		90	2,016.92	3,064.44	3,621.24	3,236.69	----	3,751.43	----	2,766.88	----	----	----	----	----	----
These rates do not include a one time policy fee of \$25 at time of issue. Open enrollees will receive rates based on their Smoker/Non-Smoker status at the time of the application.	Non-Smoker	95	2,103.05	3,228.67	3,815.52	3,414.94	----	3,949.72	----	2,865.90	----	----	----	----	----	----
fee of \$25 at time of issue. Open enrollees will receive rates based on their Smoker/Non-Smoker status at the time of the application.	Smoker	99	2,173.15	3,370.88	3,977.76	3,563.16	----	4,115.96	----	2,893.86	----	----	----	----	----	----
These rates are for an area with a 1.00 area factor.	Female	70	1,303.89	1,864.70	2,253.26	1,958.84	----	2,337.38	----	1,658.96	----	----	----	----	----	----
		75	1,498.17	2,177.15	2,597.76	2,293.32	----	2,693.90	----	1,957.20	----	----	----	----	----	----
		80	1,618.34	2,393.47	2,836.11	2,523.65	----	2,942.26	----	2,190.20	----	----	----	----	----	----
Standard:		85	1,684.44	2,531.67	2,994.34	2,671.87	----	3,102.49	----	2,376.60	----	----	----	----	----	----
Area 1 Zip Codes 434-436,440-443		90	1,754.54	2,667.86	3,152.56	2,816.08	----	3,264.73	----	2,515.24	----	----	----	----	----	----
Factor 1.0500		95	1,830.65	2,812.07	3,318.81	2,972.30	----	3,436.98	----	2,604.94	----	----	----	----	----	----
Area 2 Zip Codes 430-433,444,445,450-455		99	1,890.74	2,934.25	3,461.01	3,102.49	----	3,583.19	----	2,631.74	----	----	----	----	----	----
Factor 0.9500																
Area 3 Rest of State	Smoker	65	\$1,506.18	\$2,131.09	\$2,635.82	\$2,237.24	----	\$2,733.96	----	\$1,707.89	----	----	----	----	----	----
Factor 0.9000	Male	70	1,758.55	2,517.65	3,040.40	2,645.83	----	3,158.57	----	2,099.33	----	----	----	----	----	----
		75	2,022.93	2,940.26	3,509.08	3,096.48	----	3,639.27	----	2,475.63	----	----	----	----	----	----
		80	2,183.16	3,234.68	3,829.54	3,408.94	----	3,973.75	----	2,770.37	----	----	----	----	----	----
		85	2,273.29	3,416.95	4,041.85	3,609.23	----	4,190.07	----	3,005.70	----	----	----	----	----	----
		90	2,369.43	3,603.22	4,256.16	3,803.51	----	4,408.38	----	3,182.78	----	----	----	----	----	----
		95	2,471.58	3,797.50	4,482.49	4,013.81	----	4,642.72	----	3,295.79	----	----	----	----	----	----
		99	2,553.70	3,961.74	4,676.77	4,190.07	----	4,839.01	----	3,328.41	----	----	----	----	----	----
	Smoker	65	\$1,311.90	\$1,854.69	\$2,295.32	\$1,948.82	----	\$2,379.45	----	\$1,551.78	----	----	----	----	----	----
	Female	70	1,532.22	2,191.17	2,645.83	2,303.34	----	2,749.98	----	1,908.27	----	----	----	----	----	----
		75	1,762.55	2,561.71	3,052.42	2,695.90	----	3,166.58	----	2,250.78	----	----	----	----	----	----
		80	1,900.75	2,814.07	3,334.83	2,968.30	----	3,457.01	----	2,518.73	----	----	----	----	----	----
		85	1,980.87	2,974.31	3,519.10	3,140.55	----	3,647.28	----	2,733.09	----	----	----	----	----	----
		90	2,062.99	3,134.54	3,705.37	3,310.79	----	3,837.56	----	2,892.70	----	----	----	----	----	----
		95	2,149.11	3,304.79	3,901.65	3,493.06	----	4,039.85	----	2,996.38	----	----	----	----	----	----
		99	2,223.22	3,448.99	4,069.89	3,647.28	----	4,212.10	----	3,025.51	----	----	----	----	----	----

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1. Continued	Select	65	---	\$1,197.58	\$1,555.86	\$1,277.20	---	\$1,627.18	---	\$1,253.54	---	---	---	---	---	---
	Non-Smoker	70	---	1,409.90	1,789.74	1,507.76	---	1,872.67	---	1,541.30	---	---	---	---	---	---
Select:	Smoker	75	---	1,642.11	2,055.13	1,764.86	---	2,152.99	---	1,817.40	---	---	---	---	---	---
Area 1 Zip Codes 299	Male	80	---	1,801.35	2,245.88	1,948.97	---	2,352.04	---	2,034.09	---	---	---	---	---	---
Factor 0.9500		85	---	1,904.19	2,373.60	2,071.72	---	2,484.73	---	2,207.68	---	---	---	---	---	---
Area 2 Zip Codes 294, 295, 298		90	---	2,003.71	2,491.37	2,184.51	---	2,609.14	---	2,336.99	---	---	---	---	---	---
Factor 0.9000		95	---	2,101.57	2,594.21	2,284.03	---	2,716.95	---	2,419.71	---	---	---	---	---	---
Area 3 Rest of State		99	---	2,179.53	2,673.82	2,360.33	---	2,803.20	---	2,444.17	---	---	---	---	---	---
Factor 0.8000																
	Non-Smoker	65	---	\$1,043.32	\$1,355.16	\$1,111.33	---	\$1,416.53	---	\$1,140.54	---	---	---	---	---	---
	Smoker	70	---	1,227.44	1,557.52	1,312.03	---	1,630.50	---	1,401.50	---	---	---	---	---	---
	Female	75	---	1,429.80	1,789.74	1,535.96	---	1,874.33	---	1,653.14	---	---	---	---	---	---
		80	---	1,567.47	1,955.61	1,695.19	---	2,048.49	---	1,848.86	---	---	---	---	---	---
		85	---	1,657.04	2,066.74	1,803.01	---	2,162.94	---	2,007.30	---	---	---	---	---	---
		90	---	1,744.95	2,167.92	1,900.87	---	2,270.76	---	2,124.96	---	---	---	---	---	---
		95	---	1,829.55	2,257.49	1,987.12	---	2,365.31	---	2,200.69	---	---	---	---	---	---
		99	---	1,897.55	2,327.16	2,055.13	---	2,438.29	---	2,221.66	---	---	---	---	---	---
	Smoker	65	---	\$1,408.24	\$1,829.55	\$1,501.12	---	\$1,914.14	---	\$1,442.27	---	---	---	---	---	---
	Male	70	---	1,657.04	2,103.23	1,771.49	---	2,202.75	---	1,773.13	---	---	---	---	---	---
		75	---	1,930.73	2,416.73	2,075.03	---	2,531.18	---	2,091.18	---	---	---	---	---	---
		80	---	2,118.16	2,640.65	2,290.66	---	2,765.05	---	2,339.32	---	---	---	---	---	---
		85	---	2,237.59	2,789.93	2,434.97	---	2,920.97	---	2,538.54	---	---	---	---	---	---
		90	---	2,355.35	2,927.61	2,567.67	---	3,065.28	---	2,687.66	---	---	---	---	---	---
		95	---	2,469.80	3,048.69	2,683.78	---	3,194.66	---	2,783.19	---	---	---	---	---	---
		99	---	2,562.69	3,143.24	2,775.01	---	3,294.18	---	2,811.15	---	---	---	---	---	---
	Smoker	65	---	\$1,225.78	\$1,592.35	\$1,307.06	---	\$1,665.33	---	\$1,310.63	---	---	---	---	---	---
	Female	70	---	1,441.41	1,831.20	1,542.59	---	1,915.80	---	1,611.20	---	---	---	---	---	---
		75	---	1,680.26	2,103.23	1,804.67	---	2,202.75	---	1,900.12	---	---	---	---	---	---
		80	---	1,842.82	2,298.96	1,993.76	---	2,406.77	---	2,127.29	---	---	---	---	---	---
		85	---	1,947.31	2,428.34	2,118.16	---	2,542.79	---	2,307.87	---	---	---	---	---	---
		90	---	2,050.15	2,547.76	2,234.27	---	2,668.85	---	2,443.01	---	---	---	---	---	---
		95	---	2,149.68	2,653.92	2,337.11	---	2,779.98	---	2,530.38	---	---	---	---	---	---
		99	---	2,229.29	2,735.20	2,415.07	---	2,866.23	---	2,556.01	---	---	---	---	---	---

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COMPANY NAME	ISSUE	ATTAINED							HIGH DEDUCTIBLE					HIGH DEDUCTIBLE		
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2. AMERICAN REPUBLIC INS CO	Group Male	65	\$715.68	----	----	----	\$1,297.92	\$1,539.36	-----	-----	-----	-----	-----	-----	\$754.56	\$1,011.12
Post Office Box 1		70	895.08	----	----	----	1,592.28	1,888.56	-----	-----	-----	-----	-----	-----	925.68	1,240.44
Des Moines, Iowa 50301		75	1,075.56	----	----	----	1,881.48	2,231.52	-----	-----	-----	-----	-----	-----	1,093.92	1,465.80
Tel. No. (888) 755-3065		80	1,241.52	----	----	----	2,152.68	2,553.24	-----	-----	-----	-----	-----	-----	1,251.60	1,677.12
		85	1,419.96	----	----	----	2,461.92	2,919.96	-----	-----	-----	-----	-----	-----	1,431.36	1,918.08
Notes:	Group	65	\$660.36	----	----	----	\$1,197.00	\$1,419.72	-----	-----	-----	-----	-----	-----	\$696.00	\$932.52
For zips 29000-29399 multiply by 0.95	Female	70	807.96	----	----	----	1,436.88	1,704.24	-----	-----	-----	-----	-----	-----	835.44	1,119.48
For zips 29500-29599, multiply by 1.15		75	949.80	----	----	----	1,661.52	1,970.64	-----	-----	-----	-----	-----	-----	966.00	1,294.44
For zips 29600-29799 multiply by 0.95		80	1,073.52	----	----	----	1,861.32	2,207.52	-----	-----	-----	-----	-----	-----	1,082.16	1,450.08
All others multiply by 1.00		85	1,202.88	----	----	----	2,085.48	2,473.44	-----	-----	-----	-----	-----	-----	1,212.48	1,624.68
3. BANKERS FIDELITY LIFE INS CO	0-64	Standard	\$2,864.00	\$3,428.00	----	----	----	----	-----	-----	-----	-----	-----	-----	-----	-----
Post Office Box 105185	65-69		1,539.00	2,108.00	2,768.00	2,735.00	2,735.00	2,751.00	1,651.00	2,751.00	-----	-----	-----	-----	-----	-----
Atlanta, Georgia 30348-5185	70-74		1,724.00	2,359.00	3,037.00	3,064.00	3,064.00	2,959.00	1,775.00	2,959.00	-----	-----	-----	-----	-----	-----
Tel. No. (404) 266-5600	75-79		1,879.00	2,675.00	3,480.00	3,461.00	3,461.00	3,302.00	1,981.00	3,302.00	-----	-----	-----	-----	-----	-----
1-866-458-7500	80-84		1,972.00	2,830.00	3,716.00	3,756.00	3,756.00	3,487.00	2,092.00	3,487.00	-----	-----	-----	-----	-----	-----
	85+		1,972.00	2,830.00	3,748.00	3,791.00	3,791.00	3,511.00	2,107.00	3,511.00	-----	-----	-----	-----	-----	-----
Modal Factors:	65-69	Preferred	\$840.00	\$1,626.00	\$2,102.00	\$2,111.00	\$2,111.00	\$1,968.00	\$1,181.00	\$1,968.00	-----	-----	-----	-----	-----	-----
Annual 1.00	70-74	Non-Tobacco	911.00	1,783.00	2,274.00	2,318.00	2,318.00	2,120.00	1,272.00	2,120.00	-----	-----	-----	-----	-----	-----
Semi-Annual .52	75-79		937.00	1,967.00	2,615.00	2,545.00	2,545.00	2,296.00	1,378.00	2,296.00	-----	-----	-----	-----	-----	-----
Quarterly .27	80-84		966.00	2,099.00	2,814.00	2,785.00	2,785.00	2,426.00	1,456.00	2,426.00	-----	-----	-----	-----	-----	-----
Monthly .09	85+		966.00	2,204.00	2,928.00	2,954.00	2,954.00	2,535.00	1,521.00	2,535.00	-----	-----	-----	-----	-----	-----
Other .087																
Group Monthly.09	65-69	Preferred	\$1,008.00	\$1,951.00	\$2,522.00	\$2,532.00	\$2,532.00	\$2,361.00	\$1,417.00	\$2,361.00	-----	-----	-----	-----	-----	-----
	70-74	Tobacco	1,093.00	2,140.00	2,729.00	2,779.00	2,779.00	2,545.00	1,527.00	2,545.00	-----	-----	-----	-----	-----	-----
	75-79		1,123.00	2,360.00	3,139.00	3,055.00	3,055.00	2,756.00	1,654.00	2,756.00	-----	-----	-----	-----	-----	-----
	80-84		1,157.00	2,519.00	3,377.00	3,341.00	3,341.00	2,911.00	1,747.00	2,911.00	-----	-----	-----	-----	-----	-----
	85+		1,157.00	2,645.00	3,512.00	3,544.00	3,544.00	3,041.00	1,825.00	3,041.00	-----	-----	-----	-----	-----	-----

**MEDICARE SUPPLEMENT INSURANCE
ANNUAL PREMIUM RATES AS OF JANUARY 1, 2006
COMPILED BY SOUTH CAROLINA DEPARTMENT OF INSURANCE**

COMPANY NAME	ISSUE	ATTAINED							HIGH DEDUCTIBLE					HIGH DEDUCTIBLE		
	AGE	AGE	PLAN A	PLAN B	PLAN C	PLAN D	PLAN E	PLAN F	PLAN F	PLAN G	PLAN H	PLAN I	PLAN J	PLAN J	PLAN K	PLAN L
4. BANKERS LIFE AND CASUALTY CO	INDIVIDUAL	65	\$1,989.04	\$1,903.51	\$2,081.76	\$1,860.53	\$2,059.51	\$1,812.42	\$401.01	\$1,521.26	---	---	\$1,431.26	---	\$694.58	\$994.68
Merchandise Mart Plaza		70	2,259.25	2,249.11	2,454.74	2,232.20	2,449.18	2,199.36	478.80	1,873.73	---	---	1,765.73	---	857.01	1,227.26
Chicago, Illinois 60654-2001		75	2,639.32	2,717.21	2,969.76	2,747.32	2,977.61	2,677.40	572.83	2,318.05	---	---	2,180.82	---	1,058.28	1,515.70
Tel. No. (312) 396-6000		80+	3,126.85	3,321.03	3,651.24	3,434.15	3,671.21	3,272.59	687.05	2,884.67	---	---	2,719.29	---	1,319.66	1,889.88
(888) 282-8252				.												
	SELECT	65-69	---	\$1,085.01	\$1,427.44	---	---	\$1,409.44	---	---	---	---	---	---	---	---
NOTES:		70-74	---	1,220.72	1,595.11	---	---	1,577.77	---	---	---	---	---	---	---	---
1.) Select Rates - Available only for Greenville County		75-79	---	1,505.88	1,940.17	---	---	1,928.60	---	---	---	---	---	---	---	---
and Zip Codes: 29612, 29640, 29642, 29651		80+	---	1,654.57	2,127.91	---	---	2,107.62	---	---	---	---	---	---	---	---
and 29673																
5. BLUE CROSS & BLUE SHIELD OF SC	Annual	65-66	\$814.44	\$1,244.88	\$1,463.52	\$1,305.84	---	\$1,671.00	---	---	---	---	---	---	---	---
I-20 East at Alpine Road	Direct Bill	67-70	931.68	1,428.00	1,680.24	1,498.20	---	1,919.76	---	---	---	---	---	---	---	---
Columbia, South Carolina 29219	With	71-79	1,146.00	1,877.76	2,330.16	2,038.08	---	2,439.84	---	---	---	---	---	---	---	---
Tel. No. (803) 788-3860	Automatic	80+	1,215.60	2,080.92	2,605.20	2,322.24	---	2,979.00	---	---	---	---	---	---	---	---
(800) 444-0030	Claims															
	Filing															
Note:*																
All rates are based on 12 times the Monthly Direct billing rate.	Without	65-66	\$754.44	\$1,184.88	\$1,403.52	\$1,245.84	---	\$1,611.00	---	---	---	---	---	---	---	---
	Automatic	67-70	871.68	1,368.00	1,620.24	1,438.20	---	1,859.76	---	---	---	---	---	---	---	---
	Claims	71-79	1,086.00	1,817.76	2,270.16	1,978.08	---	2,379.84	---	---	---	---	---	---	---	---
BCBSSC does not bill on an annual basis.	Filing	80+	1,155.60	2,020.92	2,545.20	2,262.24	---	2,919.00	---	---	---	---	---	---	---	---
Quarterly billing is available.	Select	65-66	---	\$993.96	\$1,297.32	\$1,066.44	---	\$1,550.52	---	---	---	---	---	---	---	---
	Annual	67-70	---	1,138.20	1,488.60	1,221.84	---	1,780.92	---	---	---	---	---	---	---	---
Monthly Bank draft rates provide a 6% discount from Monthly Direct billing rates.	Direct Bill	71-79	---	1,491.72	2,077.56	1,668.12	---	2,190.84	---	---	---	---	---	---	---	---
		80+	---	1,546.56	2,219.52	1,804.08	---	2,612.64	---	---	---	---	---	---	---	---
	Select	65-66	---	\$933.96	\$1,237.32	\$1,006.44	---	\$1,490.52	---	---	---	---	---	---	---	---
	Without	67-70	---	1,078.20	1,428.60	1,161.84	---	1,720.92	---	---	---	---	---	---	---	---
	Automatic	71-79	---	1,431.72	2,017.56	1,608.12	---	2,130.84	---	---	---	---	---	---	---	---
	Claims	80+	---	1,486.56	2,159.52	1,744.08	---	2,552.64	---	---	---	---	---	---	---	---
	Filing															

**MEDICARE SUPPLEMENT INSURANCE
ANNUAL PREMIUM RATES AS OF JANUARY 1, 2006
COMPILED BY SOUTH CAROLINA DEPARTMENT OF INSURANCE**

COMPANY NAME	ISSUE	ATTAINED							HIGH DEDUCTIBLE					HIGH DEDUCTIBLE		
	AGE	AGE	PLAN A	PLAN B	PLAN C	PLAN D	PLAN E	PLAN F	PLAN F	PLAN G	PLAN H	PLAN I	PLAN J	PLAN J	PLAN K	PLAN L
6. CENTRAL RESERVE LIFE INS CO	Female	65	\$1,365.00	----	\$1,697.00	\$1,331.00	\$1,241.00	\$1,656.00	\$590.00	\$1,342.00	----	----	----	----	----	----
6201 Johnson Drive; Post Office Box 29190		70	1,527.00	----	1,902.00	1,490.00	1,386.00	1,854.00	660.00	1,502.00	----	----	----	----	----	----
Mission, KS 66201-29190		75	1,761.00	----	2,188.00	1,716.00	1,594.00	2,134.00	761.00	1,729.00	----	----	----	----	----	----
Tel. No. (800) 945-8554		80	1,927.00	----	2,399.00	1,881.00	1,745.00	2,338.00	834.00	1,895.00	----	----	----	----	----	----
		85	2,077.00	----	2,586.00	2,028.00	1,880.00	2,520.00	900.00	2,043.00	----	----	----	----	----	----
Notes: Zip Codes																
The Following Apply:																
1. Area Factors:																
Zips 294-295, 298-299 0.85																
All Other Zips 0.80																
2. Smoker Factor - above rates times 1.10																
3. Males: add 15%																
4. All adjustment factors are multiplicative.																
5. Add an additional \$25.00 administration fee to																
the initial premium.																
6. Modal Factors:																
Semi-Annual 0.520																
Quarterly 0.265																
Monthly Bank Draft 0.085																
7. COMBINED INS CO OF AMERICA	65		\$1,498.91	\$1,878.04	\$2,291.86	----	----	\$2,293.36	----	----	----	----	----	----	----	----
5050 Broadway	66-70		1,576.08	1,990.68	2,429.79	----	----	2,416.68	----	----	----	----	----	----	----	----
Chicago, Illinois 60640	71-75		1,863.98	2,361.61	2,883.40	----	----	2,872.89	----	----	----	----	----	----	----	----
Tel. No. (800) 544-5531	76-80		2,113.32	2,666.81	3,252.12	----	----	3,255.13	----	----	----	----	----	----	----	----
	65	Non-Smoker	----	----	----	\$1,886.07	----	----	----	\$1,622.18	----	----	----	----	----	----
	70		----	----	----	1,886.07	----	----	----	2,058.55	----	----	----	----	----	----
	75		----	----	----	2,461.48	----	----	----	2,528.66	----	----	----	----	----	----
	80		----	----	----	2,797.14	----	----	----	2,965.68	----	----	----	----	----	----
	65	Smoker	----	----	----	\$2,179.72	----	----	----	\$1,874.43	----	----	----	----	----	----
	70		----	----	----	2,179.72	----	----	----	2,378.64	----	----	----	----	----	----
	75		----	----	----	2,844.72	----	----	----	2,921.88	----	----	----	----	----	----
	80		----	----	----	3,232.62	----	----	----	3,426.85	----	----	----	----	----	----

**MEDICARE SUPPLEMENT INSURANCE
ANNUAL PREMIUM RATES AS OF JANUARY 1, 2006
COMPILED BY SOUTH CAROLINA DEPARTMENT OF INSURANCE**

COMPANY NAME	ISSUE	ATTAINED							HIGH DEDUCTIBLE					HIGH DEDUCTIBLE		
	AGE	AGE	PLAN A	PLAN B	PLAN C	PLAN D	PLAN E	PLAN F	PLAN F	PLAN G	PLAN H	PLAN I	PLAN J	PLAN J	PLAN K	PLAN L
8. CONSECO INSURANCE CO	Standard	65	\$818.00	----	----	\$962.00	----	\$1,127.00	----	\$981.00	----	----	----	----	----	----
11815 N. Pennsylvania Street	Zip Codes	70	1,163.00	----	----	1,368.00	----	1,583.00	----	1,395.00	----	----	----	----	----	----
Carmel, IN 46032	290-291,293	75	1,352.00	----	----	1,590.00	----	1,790.00	----	1,621.00	----	----	----	----	----	----
Tel. No. (800) 541-2254	296-297	80	1,509.00	----	----	1,775.00	----	1,966.00	----	1,810.00	----	----	----	----	----	----
	Female	85+	2,028.00	----	----	2,247.00	----	2,068.00	----	2,068.00	----	----	----	----	----	----
Notes: Rates vary by zip code, gender and by Standard or Preferred rating.	Standard	65	\$890.00	----	----	\$1,048.00	----	\$1,227.00	----	\$1,068.00	----	----	----	----	----	----
Zip Codes: 290-291, 293, 296-297	Zip Codes	70	1,266.00	----	----	1,489.00	----	1,723.00	----	1,519.00	----	----	----	----	----	----
Zip Codes: 292, 295	292, 295	75	1,472.00	----	----	1,730.00	----	1,949.00	----	1,765.00	----	----	----	----	----	----
Zip Codes 294, 298-299	Female	80	1,643.00	----	----	1,932.00	----	2,141.00	----	1,970.00	----	----	----	----	----	----
Add \$15.00 Policy Fee To First Premium		85+	1,877.00	----	----	2,208.00	----	2,446.00	----	2,252.00	----	----	----	----	----	----
PAYMENT.	Standard	65	\$973.00	----	----	\$1,145.00	----	\$1,341.00	----	\$1,168.00	----	----	----	----	----	----
	Zip Codes	70	1,384.00	----	----	1,627.00	----	1,884.00	----	1,660.00	----	----	----	----	----	----
294,298-299	75	1,608.00	----	----	1,891.00	----	2,130.00	----	1,929.00	----	----	----	----	----	----	----
	Female	80	1,795.00	----	----	2,112.00	----	2,340.00	----	2,154.00	----	----	----	----	----	----
		85+	2,051.00	----	----	2,413.00	----	2,673.00	----	2,461.00	----	----	----	----	----	----
	Preferred	65	\$818.00	----	----	\$962.00	----	\$1,127.00	----	\$981.00	----	----	----	----	----	----
	Zip Codes	70	988.00	----	----	1,163.00	----	1,345.00	----	1,186.00	----	----	----	----	----	----
290-291,293	75	1,149.00	----	----	1,351.00	----	1,522.00	----	1,378.00	----	----	----	----	----	----	----
	296-297	80	1,282.00	----	----	1,509.00	----	1,672.00	----	1,539.00	----	----	----	----	----	----
	Female	85+	1,466.00	----	----	1,724.00	----	1,909.00	----	1,758.00	----	----	----	----	----	----
	Preferred	65	\$890.00	----	----	\$1,048.00	----	\$1,227.00	----	\$1,068.00	----	----	----	----	----	----
	Zip Codes	70	1,076.00	----	----	1,266.00	----	1,465.00	----	1,291.00	----	----	----	----	----	----
292, 295	75	1,250.00	----	----	1,471.00	----	1,656.00	----	1,500.00	----	----	----	----	----	----	----
	Female	80	1,396.00	----	----	1,643.00	----	1,820.00	----	1,675.00	----	----	----	----	----	----
		85+	1,595.00	----	----	1,877.00	----	2,079.00	----	1,914.00	----	----	----	----	----	----
	Preferred	65	\$973.00	----	----	\$1,145.00	----	\$1,341.00	----	\$1,168.00	----	----	----	----	----	----
	Zip Codes	70	1,176.00	----	----	1,384.00	----	1,601.00	----	1,411.00	----	----	----	----	----	----
294,298-299	75	1,367.00	----	----	1,607.00	----	1,810.00	----	1,639.00	----	----	----	----	----	----	----
	Female	80	1,526.00	----	----	1,795.00	----	1,989.00	----	1,831.00	----	----	----	----	----	----
		85+	1,744.00	----	----	2,051.00	----	2,272.00	----	2,092.00	----	----	----	----	----	----
	Preferred Plus	65	\$818.00	----	----	\$962.00	----	\$1,127.00	----	\$981.00	----	----	----	----	----	----
	Zip Codes	70	872.00	----	----	1,025.00	----	1,187.00	----	1,046.00	----	----	----	----	----	----
290-291,293	75	1,014.00	----	----	1,192.00	----	1,342.00	----	1,216.00	----	----	----	----	----	----	----
	296-297	80	1,131.00	----	----	1,331.00	----	1,475.00	----	1,358.00	----	----	----	----	----	----
	Female	85+	1,292.00	----	----	1,521.00	----	1,685.00	----	1,551.00	----	----	----	----	----	----

**MEDICARE SUPPLEMENT INSURANCE
ANNUAL PREMIUM RATES AS OF JANUARY 1, 2006
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COMPANY NAME	ISSUE	ATTAINED							HIGH DEDUCTIBLE					HIGH DEDUCTIBLE		
	AGE	AGE	PLAN A	PLAN B	PLAN C	PLAN D	PLAN E	PLAN F	PLAN F	PLAN G	PLAN H	PLAN I	PLAN J	PLAN J	PLAN K	PLAN L
8. Continued	Preferred Plus	65	\$890.00	----	----	\$1,048.00	----	\$1,227.00	----	\$1,068.00	----	----	----	----	----	----
	Zip Codes	70	949.00	----	----	1,116.00	----	1,293.00	----	1,139.00	----	----	----	----	----	----
	292, 295	75	1,103.00	----	----	1,298.00	----	1,461.00	----	1,324.00	----	----	----	----	----	----
	Female	80	1,232.00	----	----	1,449.00	----	1,606.00	----	1,478.00	----	----	----	----	----	----
		85+	1,407.00	----	----	1,656.00	----	1,834.00	----	1,688.00	----	----	----	----	----	----
	Preferred Plus	65	\$973.00	----	----	\$1,145.00	----	\$1,341.00	----	\$1,168.00	----	----	----	----	----	----
	Zip Codes	70	1,038.00	----	----	1,220.00	----	1,413.00	----	1,245.00	----	----	----	----	----	----
	294,298-299	75	1,206.00	----	----	1,419.00	----	1,597.00	----	1,447.00	----	----	----	----	----	----
	Female	80	1,346.00	----	----	1,584.00	----	1,755.00	----	1,616.00	----	----	----	----	----	----
		85+	1,538.00	----	----	1,810.00	----	2,005.00	----	1,845.00	----	----	----	----	----	----
9. CONSTITUTION LIFE INSURANCE CO	Standard	65	\$905.18	\$1,197.99	\$1,449.50	\$1,264.82	----	\$1,494.45	----	----	----	----	----	----	----	----
1001 Heathrow Park Lane	Non-Smoker	70	1,077.71	1,436.13	1,709.51	1,518.75	----	1,761.75	----	----	----	----	----	----	----	----
Lake Mary, FL 32746	Smoker	75	1,268.46	1,711.94	2,013.26	1,815.21	----	2,075.22	----	----	----	----	----	----	----	----
Tel. No. (407) 995-8000	Female	80	1,406.97	1,928.21	2,255.04	2,050.92	----	2,323.08	----	----	----	----	----	----	----	----
1- (800) -789-6364		85	1,489.59	2,074.01	2,422.71	2,212.52	----	2,494.40	----	----	----	----	----	----	----	----
		90	1,568.57	2,197.94	2,561.22	2,348.60	----	2,636.55	----	----	----	----	----	----	----	----
Standard:		95	1,646.33	2,296.35	2,666.93	2,451.87	----	2,747.12	----	----	----	----	----	----	----	----
Area 1 for Zip Code 299 - Factor 1.0		99	1,709.51	2,364.39	2,734.97	2,518.70	----	2,817.59	----	----	----	----	----	----	----	----
Area 1 Zip Code 294-295, 298 - Factor .9																
Area 2 for Rest of State - Factor 0.8	Standard	65	\$1,040.04	\$1,376.60	\$1,665.77	\$1,453.14	----	\$1,716.80	----	----	----	----	----	----	----	----
	Non-Smoker	70	1,238.09	1,649.97	1,964.66	1,744.74	----	2,024.19	----	----	----	----	----	----	----	----
	Smoker	75	1,458.00	1,967.09	2,313.36	2,084.94	----	2,383.83	----	----	----	----	----	----	----	----
	Male	80	1,617.17	2,214.95	2,591.60	2,355.89	----	2,669.36	----	----	----	----	----	----	----	----
		85	1,711.94	2,382.62	2,783.57	2,541.78	----	2,866.19	----	----	----	----	----	----	----	----
		90	1,803.06	2,524.77	2,942.73	2,697.30	----	3,029.00	----	----	----	----	----	----	----	----
		95	1,891.76	2,638.98	3,064.23	2,817.59	----	3,155.36	----	----	----	----	----	----	----	----
		99	1,963.44	2,715.53	3,143.21	2,894.13	----	3,237.98	----	----	----	----	----	----	----	----
	Standard	65	\$1,063.13	\$1,406.97	\$1,702.22	\$1,484.73	----	\$1,754.46	----	----	----	----	----	----	----	----
		70	1,264.82	1,686.42	2,007.18	1,783.62	----	2,069.15	----	----	----	----	----	----	----	----
	Smoker	75	1,489.59	2,010.83	2,364.39	2,131.11	----	2,437.29	----	----	----	----	----	----	----	----
	Female	80	1,652.40	2,263.55	2,648.70	2,408.13	----	2,728.89	----	----	----	----	----	----	----	----
		85	1,749.60	2,434.86	2,844.32	2,598.89	----	2,929.37	----	----	----	----	----	----	----	----
		90	1,841.94	2,580.66	3,008.34	2,758.05	----	3,097.04	----	----	----	----	----	----	----	----
		95	1,934.28	2,697.30	3,132.27	2,879.55	----	3,225.83	----	----	----	----	----	----	----	----
		99	2,007.18	2,776.28	3,212.46	2,958.53	----	3,309.66	----	----	----	----	----	----	----	----
	Standard	65	\$1,222.29	\$1,615.95	\$1,956.15	\$1,705.86	----	\$2,015.69	----	----	----	----	----	----	----	----
		70	1,453.14	1,937.93	2,307.29	2,048.49	----	2,377.76	----	----	----	----	----	----	----	----
	Smoker	75	1,711.94	2,309.72	2,716.74	2,448.23	----	2,799.36	----	----	----	----	----	----	----	----
	Male	80	1,899.05	2,601.32	3,042.36	2,766.56	----	3,134.70	----	----	----	----	----	----	----	----
		85	2,009.61	2,798.15	3,268.35	2,985.26	----	3,365.55	----	----	----	----	----	----	----	----
		90	2,116.53	2,964.60	3,455.46	3,168.72	----	3,557.52	----	----	----	----	----	----	----	----
		95	2,222.24	3,098.25	3,598.83	3,308.45	----	3,705.75	----	----	----	----	----	----	----	----
		99	2,306.07	3,189.38	3,691.17	3,399.57	----	3,801.74	----	----	----	----	----	----	----	----

**MEDICARE SUPPLEMENT INSURANCE
ANNUAL PREMIUM RATES AS OF JANUARY 1, 2006
COMPILED BY SOUTH CAROLINA DEPARTMENT OF INSURANCE**

COMPANY NAME	ISSUE	ATTAINED							HIGH DEDUCTIBLE					HIGH DEDUCTIBLE		
	AGE	AGE	PLAN A	PLAN B	PLAN C	PLAN D	PLAN E	PLAN F	PLAN F	PLAN G	PLAN H	PLAN I	PLAN J	PLAN J	PLAN K	PLAN L
10. CONTINENTAL GENERAL INS CO 6201 Johnson Drive; P.O. Box 29136 Mission, Kansas 66201-9136 Tel. No. (800) 284-2898	Female	65	\$1,850.00	\$1,819.00	\$2,128.00	\$1,734.00	\$1,190.00	\$1,907.00	\$491.00	\$1,804.00	----	----	----	----	----	----
		70	2,238.00	2,201.00	2,579.00	2,098.00	1,439.00	2,308.00	594.00	2,186.00	----	----	----	----	----	----
		75	2,581.00	2,536.00	2,968.00	2,418.00	1,658.00	2,658.00	684.00	2,516.00	----	----	----	----	----	----
		80	2,825.00	2,779.00	3,254.00	2,650.00	1,818.00	2,912.00	750.00	2,758.00	----	----	----	----	----	----
		85	3,046.00	2,997.00	3,507.00	2,856.00	1,958.00	3,139.00	808.00	2,974.00	----	----	----	----	----	----
*The Following Apply:																
1. Area Factors: Zips 294-295, 298-299 1.00																
All other Zips .95																
2. Males - add 11.5%																
3. Tobacco User Surcharge: None																
4. All adjustment factors are multiplicative.																
5. Add an additional/ \$25.00 administrative fee to the initial premium.																
6. Modal Factors Semi-Annual 0.520																
Quarterly 0.265																
Monthly Bank Draft 0.085																
11. CONTINENTAL LIFE INS CO OF BRENTWOOD, TENNESSEE Continental Life Center 101 Continental Place Brentwood, Tennessee 37027 Tel. No. (615) 377-1300 (800) 264-4000	Preferred	65	\$748.00	\$945.00	\$1,273.00	\$983.00	\$1,265.00	\$1,291.00	----	\$1,049.00	----	----	----	----	----	----
	Female	70	830.00	1,048.00	1,410.00	1,110.00	1,398.00	1,430.00	----	1,165.00	----	----	----	----	----	----
		75	985.00	1,244.00	1,674.00	1,350.00	1,665.00	1,699.00	----	1,390.00	----	----	----	----	----	----
		80	1,169.00	1,477.00	1,989.00	1,638.00	1,990.00	2,019.00	----	1,662.00	----	----	----	----	----	----
		85	1,389.00	1,755.00	2,361.00	1,944.00	2,390.00	2,399.00	----	1,992.00	----	----	----	----	----	----
The above rates do not include a one-time \$20 police fee at time of issue.	Preferred	65	\$860.00	\$1,087.00	\$1,464.00	\$1,130.00	\$1,455.00	\$1,485.00	----	\$1,207.00	----	----	----	----	----	----
	Male	70	955.00	1,205.00	1,622.00	1,277.00	1,609.00	1,430.00	----	1,340.00	----	----	----	----	----	----
		75	1,134.00	1,431.00	1,926.00	1,553.00	1,915.00	1,699.00	----	1,599.00	----	----	----	----	----	----
		80	1,345.00	1,699.00	2,288.00	1,884.00	2,289.00	2,019.00	----	1,912.00	----	----	----	----	----	----
		85	1,598.00	2,019.00	2,716.00	2,236.00	2,750.00	2,399.00	----	2,291.00	----	----	----	----	----	----
Mode Factors: Ann: 1.0000 Semi: 0.5200 Quarterly: 0.2650 Monthly: 0.0833	Standard	65	\$831.00	\$1,049.00	\$1,414.00	\$1,091.00	\$1,405.00	\$1,433.00	----	\$1,165.00	----	----	----	----	----	----
Area Factors: Zip Codes 290-293, 296 0.90 (Shown) All other Zip Codes 1.00	Female	70	922.00	1,163.00	1,566.00	1,232.00	1,553.00	1,588.00	----	1,294.00	----	----	----	----	----	----
		75	1,094.00	1,382.00	1,859.00	1,499.00	1,849.00	1,887.00	----	1,544.00	----	----	----	----	----	----
		80	1,298.00	1,641.00	2,209.00	1,819.00	2,210.00	2,242.00	----	1,846.00	----	----	----	----	----	----
		85	1,543.00	1,950.00	2,623.00	2,159.00	2,655.00	2,665.00	----	2,212.00	----	----	----	----	----	----
	Standard	65	\$956.00	\$1,207.00	\$1,627.00	\$1,256.00	\$1,616.00	\$1,650.00	----	\$1,341.00	----	----	----	----	----	----
	Male	70	1,061.00	1,339.00	1,803.00	1,418.00	1,787.00	1,828.00	----	1,489.00	----	----	----	----	----	----
		75	1,259.00	1,590.00	2,139.00	1,726.00	2,128.00	2,171.00	----	1,777.00	----	----	----	----	----	----
		80	1,494.00	1,888.00	2,543.00	2,093.00	2,544.00	2,581.00	----	2,124.00	----	----	----	----	----	----
		85	1,775.00	2,244.00	3,018.00	2,485.00	3,055.00	3,067.00	----	2,546.00	----	----	----	----	----	----

**MEDICARE SUPPLEMENT INSURANCE
ANNUAL PREMIUM RATES AS OF JANUARY 1, 2006
COMPILED BY SOUTH CAROLINA DEPARTMENT OF INSURANCE**

COMPANY NAME	ISSUE	ATTAINED							HIGH DEDUCTIBLE					HIGH DEDUCTIBLE		
	AGE	AGE	PLAN A	PLAN B	PLAN C	PLAN D	PLAN E	PLAN F	PLAN F	PLAN G	PLAN H	PLAN I	PLAN J	PLAN J	PLAN K	PLAN L
12. GLOBE LIFE AND ACCIDENT INS CO		65	\$735.00	\$1,113.00	\$1,281.00	----	----	\$1,291.00	-----	-----	-----	-----	-----	-----	-----	-----
P.O. Box 2440		70	981.00	1,407.00	1,575.00	----	----	1,584.00	-----	-----	-----	-----	-----	-----	-----	-----
McKinney , TX 75050		75	1,044.00	1,599.00	1,855.00	----	----	1,866.00	-----	-----	-----	-----	-----	-----	-----	-----
Tel. No. (800) 801-6831		80+	1,051.00	1,620.00	1,968.00	----	----	1,982.00	-----	-----	-----	-----	-----	-----	-----	-----
13. GOLDEN RULE INS CO	Non-	<65	\$2,464.14	----	\$3,024.45	----	----	\$2,870.36	----	\$2,009.57	-----	-----	-----	-----	-----	-----
712 11th Street	Tobacco	65	1,342.60	----	1,725.11	----	----	1,637.20	----	1,368.65	-----	-----	-----	-----	-----	-----
Lawrenceville, IL 62439	Male	70	1,510.85	----	1,941.27	----	----	1,842.36	----	1,540.16	-----	-----	-----	-----	-----	-----
Tel. No. 800-474-4467		75	1,751.48	----	2,250.47	----	----	2,135.81	----	1,785.47	-----	-----	-----	-----	-----	-----
		80	2,030.46	----	2,608.91	----	----	2,475.99	----	2,069.86	-----	-----	-----	-----	-----	-----
		85+	2,353.85	----	3,024.45	----	----	2,870.36	----	2,399.53	-----	-----	-----	-----	-----	-----
	Non-	<65	\$2,229.46	----	\$2,736.40	----	----	\$2,596.98	----	\$1,818.17	-----	-----	-----	-----	-----	-----
	Tobacco	65	1,214.72	----	1,560.82	----	----	1,481.27	----	1,238.32	-----	-----	-----	-----	-----	-----
	Female	70	1,366.94	----	1,756.40	----	----	1,666.89	----	1,393.48	-----	-----	-----	-----	-----	-----
		75	1,584.67	----	2,036.14	----	----	1,932.40	----	1,615.42	-----	-----	-----	-----	-----	-----
		80	1,837.07	----	2,360.44	----	----	2,240.17	----	1,872.72	-----	-----	-----	-----	-----	-----
		85+	2,129.68	----	2,736.40	----	----	2,596.98	----	2,171.00	-----	-----	-----	-----	-----	-----
	Smoker	<65	\$2,714.33	----	\$3,331.49	----	----	\$3,161.74	----	\$2,213.58	-----	-----	-----	-----	-----	-----
	Male	65	1,342.60	----	1,725.11	----	----	1,637.20	----	1,368.65	-----	-----	-----	-----	-----	-----
		70	1,664.23	----	2,138.37	----	----	2,029.41	----	1,696.52	-----	-----	-----	-----	-----	-----
		75	1,929.31	----	2,478.95	----	----	2,352.64	----	1,966.73	-----	-----	-----	-----	-----	-----
		80	2,236.58	----	2,873.78	----	----	2,727.37	----	2,279.99	-----	-----	-----	-----	-----	-----
		85+	2,592.84	----	3,331.49	----	----	3,161.74	----	2,643.13	-----	-----	-----	-----	-----	-----
	Smoker	<65	\$2,455.81	----	\$3,014.21	----	----	\$2,860.63	----	\$2,002.76	-----	-----	-----	-----	-----	-----
	Female	65	1,214.72	----	1,560.82	----	----	1,481.27	----	1,238.32	-----	-----	-----	-----	-----	-----
		70	1,505.72	----	1,934.71	----	----	1,836.14	----	1,534.95	-----	-----	-----	-----	-----	-----
		75	1,745.56	----	2,242.85	----	----	2,128.57	----	1,779.44	-----	-----	-----	-----	-----	-----
		80	2,023.57	----	2,600.08	----	----	2,467.59	----	2,062.85	-----	-----	-----	-----	-----	-----
		85+	2,345.88	----	3,014.21	----	----	2,860.63	----	2,391.41	-----	-----	-----	-----	-----	-----

**MEDICARE SUPPLEMENT INSURANCE
ANNUAL PREMIUM RATES AS OF JANUARY 1, 2006
COMPILED BY SOUTH CAROLINA DEPARTMENT OF INSURANCE**

COMPANY NAME	ISSUE	ATTAINED							HIGH DEDUCTIBLE					HIGH DEDUCTIBLE		
	AGE	AGE	PLAN A	PLAN B	PLAN C	PLAN D	PLAN E	PLAN F	PLAN F	PLAN G	PLAN H	PLAN I	PLAN J	PLAN J	PLAN K	PLAN L
14. GREAT AMERICAN LIFE INSURANCE CO	Area 1	65-67	\$1,025.40	\$1,168.11	\$1,407.60	\$1,170.07		\$1,412.49	----	\$1,173.98	----	----	----	----	----	----
5508 Parkcrest Drive	Non-Smoker	70	1,163.23	1,333.31	1,606.03	1,336.24		1,611.90	----	1,340.15	----	----	----	----	----	----
Austin, Texas 78731	Male	75	1,374.37	1,606.03	1,927.63	1,608.97		1,934.47	----	1,614.83	----	----	----	----	----	----
Tel. No. (800) 880-2745		80	1,518.06	1,818.15	2,170.05	1,821.08		2,176.89	----	1,826.95	----	----	----	----	----	----
Notes: Area 1 for Zip Codes 290-293, 296-297	Area 1	65-67	\$891.65	\$1,015.75	\$1,224.00	\$1,017.45		\$1,228.25	----	\$1,020.85	----	----	----	----	----	----
Area 2 for Zip Codes 294-295, 298-299	Non-Smoker	70	1,011.50	1,159.40	1,396.55	1,161.95		1,401.65	----	1,165.35	----	----	----	----	----	----
	Female	75	1,195.10	1,396.55	1,676.20	1,399.10		1,682.15	----	1,404.20	----	----	----	----	----	----
Add one time enrollment fee of \$25		80	1,320.05	1,581.00	1,887.00	1,583.55		1,892.95	----	1,588.65	----	----	----	----	----	----
	Area 1	65-67	\$1,281.75	\$1,460.14	\$1,759.50	\$1,462.58		\$1,765.61	----	\$1,467.47	----	----	----	----	----	----
	Smoker	70	1,454.03	1,666.64	2,007.54	1,670.30		2,014.87	----	1,675.19	----	----	----	----	----	----
	Male	75	1,717.96	2,007.54	2,409.54	2,011.21		2,418.09	----	2,018.54	----	----	----	----	----	----
		80	1,897.57	2,272.69	2,712.56	2,276.35		2,721.12	----	2,283.68	----	----	----	----	----	----
	Area 1	65-67	\$1,114.56	\$1,269.69	\$1,530.00	\$1,271.81		\$1,535.31	----	\$1,276.06	----	----	----	----	----	----
	Smoker	70	1,264.38	1,449.25	1,745.69	1,452.44		1,752.06	----	1,456.69	----	----	----	----	----	----
	Female	75	1,493.88	1,745.69	2,095.25	1,748.88		2,102.69	----	1,755.25	----	----	----	----	----	----
		80	1,650.06	1,976.25	2,358.75	1,979.44		2,366.19	----	1,985.81	----	----	----	----	----	----
	Area 2	65-67	\$1,146.03	\$1,305.54	\$1,573.20	\$1,307.72		\$1,578.66	----	\$1,312.09	----	----	----	----	----	----
	Non-Smoker	70	1,300.08	1,490.17	1,794.98	1,493.45		1,801.53	----	1,497.82	----	----	----	----	----	----
	Male	75	1,536.06	1,794.98	2,154.41	1,978.26		2,162.06	----	1,804.81	----	----	----	----	----	----
		80	1,696.65	2,032.05	2,425.35	2,035.33		2,433.00	----	2,041.88	----	----	----	----	----	----
	Area 2	65-67	\$996.55	\$1,135.25	\$1,368.00	\$1,137.15		\$1,372.75	----	\$1,140.95	----	----	----	----	----	----
	Non-Smoker	70	1,130.50	1,295.80	1,560.85	1,298.65		1,566.55	----	1,302.45	----	----	----	----	----	----
	Female	75	1,335.70	1,560.85	1,873.40	1,563.70		1,880.05	----	1,569.40	----	----	----	----	----	----
		80	1,475.35	1,767.00	2,109.00	1,769.85		2,115.65	----	1,775.55	----	----	----	----	----	----
	Area 2	65-67	\$1,432.54	\$1,631.92	\$1,966.50	\$1,634.65		\$1,973.33	----	\$1,640.12	----	----	----	----	----	----
	Smoker	70	1,625.09	1,862.71	2,243.72	1,866.81		2,251.92	----	1,872.27	----	----	----	----	----	----
	Male	75	1,920.07	2,243.72	2,693.01	2,247.82		2,702.57	----	2,256.01	----	----	----	----	----	----
		80	2,120.82	2,540.06	3,031.69	2,544.16		3,041.25	----	2,552.35	----	----	----	----	----	----
	Area 2	65-67	\$1,245.69	\$1,419.06	\$1,710.00	\$1,421.44		\$1,715.94	----	\$1,426.19	----	----	----	----	----	----
	Smoker	70	1,413.13	1,619.75	1,951.06	1,623.31		1,958.19	----	1,628.06	----	----	----	----	----	----
	Female	75	1,669.63	1,951.06	2,341.75	1,954.63		2,350.06	----	1,961.75	----	----	----	----	----	----
		80	1,844.19	2,208.75	2,636.25	2,212.31		2,644.56	----	2,219.44	----	----	----	----	----	----

**MEDICARE SUPPLEMENT INSURANCE
ANNUAL PREMIUM RATES AS OF JANUARY 1, 2006
COMPILED BY SOUTH CAROLINA DEPARTMENT OF INSURANCE**

COMPANY NAME	ISSUE	ATTAINED							HIGH DEDUCTIBLE					HIGH DEDUCTIBLE		
	AGE	AGE	PLAN A	PLAN B	PLAN C	PLAN D	PLAN E	PLAN F	PLAN F	PLAN G	PLAN H	PLAN I	PLAN J	PLAN J	PLAN K	PLAN L
15. GUARANTEE TRUST LIFE INS CO		65	\$1,411.40	\$2,128.15	\$2,486.85	\$1,738.50	----	\$2,503.20	----	\$1,845.50	----	----	----	----	----	----
1275 Milwaukee Avenue		70	1,662.55	2,496.05	2,919.60	2,042.30	----	2,947.20	----	2,167.50	----	----	----	----	----	----
Glenview, Illinois 60025		75	1,911.00	2,858.30	3,346.70	2,342.20	----	3,386.40	----	2,482.15	----	----	----	----	----	----
Tel. No. (847)-699-0600		80	2,137.60	3,197.90	3,740.10	2,618.55	----	3,792.00	----	2,776.55	----	----	----	----	----	----
(800)-338-7452		85+	2,478.85	3,712.95	4,344.25	3,039.95	----	4,392.00	----	3,221.85	----	----	----	----	----	----
Notes: The above rates reflect current deductible and benefit levels. We anticipate that they will need to be adjusted each year to reflect deductible and/or benefit changes, trend, and utilization changes. Premiums will change as your age changes.																
*Monthly Bank Draft (MBD) requires 2 months submitted																
Initial Premium: Add \$20 (payable only once).																
16. LINCOLN HERITAGE LIFE INS CO	Preferred	65	\$1,299.00	\$1,687.00	\$2,024.00	\$1,744.00	----	\$2,085.00	----	----	----	----	----	----	----	----
Post Office Box 29045	Group Male	70	1,464.00	1,914.00	2,270.00	1,981.00	----	2,340.00	----	----	----	----	----	----	----	----
Phoenix AZ 85038		75	1,703.00	2,255.00	2,648.00	2,340.00	----	2,728.00	----	----	----	----	----	----	----	----
		80	1,867.00	2,513.00	2,935.00	2,615.00	----	3,025.00	----	----	----	----	----	----	----	----
4343 East Camelback Road		85	1,971.00	2,690.00	3,140.00	2,809.00	----	3,235.00	----	----	----	----	----	----	----	----
Phoenix AZ 85018	Preferred	65	\$1,130.00	\$1,469.00	\$1,760.00	\$1,517.00	----	\$1,814.00	----	----	----	----	----	----	----	----
Customer Service (800) 438-7180	Group	70	1,272.00	1,664.00	1,974.00	1,723.00	----	2,036.00	----	----	----	----	----	----	----	----
	Female	75	1,481.00	1,962.00	2,304.00	2,036.00	----	2,374.00	----	----	----	----	----	----	----	----
		80	1,624.00	2,184.00	2,553.00	2,274.00	----	2,631.00	----	----	----	----	----	----	----	----
		85	1,714.00	2,339.00	2,731.00	2,443.00	----	2,812.00	----	----	----	----	----	----	----	----
	Standard	65	\$1,444.00	\$1,876.00	\$2,249.00	\$1,938.00	----	\$2,318.00	----	----	----	----	----	----	----	----
	Group Male	70	1,628.00	2,128.00	2,523.00	2,201.00	----	2,602.00	----	----	----	----	----	----	----	----
		75	1,892.00	2,508.00	2,943.00	2,602.00	----	3,033.00	----	----	----	----	----	----	----	----
		80	2,076.00	2,792.00	3,263.00	2,906.00	----	3,361.00	----	----	----	----	----	----	----	----
		85	2,190.00	2,989.00	3,489.00	3,122.00	----	3,592.00	----	----	----	----	----	----	----	----
	Standard	65	\$1,254.00	\$1,631.00	\$1,955.00	\$1,685.00	----	\$2,015.00	----	----	----	----	----	----	----	----
	Group	70	1,415.00	1,850.00	2,195.00	1,914.00	----	2,262.00	----	----	----	----	----	----	----	----
	Female	75	1,646.00	2,181.00	2,559.00	2,263.00	----	2,636.00	----	----	----	----	----	----	----	----
		80	1,805.00	2,427.00	2,837.00	2,526.00	----	2,924.00	----	----	----	----	----	----	----	----
		85	1,904.00	2,690.00	3,035.00	2,715.00	----	3,124.00	----	----	----	----	----	----	----	----

**MEDICARE SUPPLEMENT INSURANCE
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COMPILED BY SOUTH CAROLINA DEPARTMENT OF INSURANCE**

COMPANY NAME	ISSUE	ATTAINED							HIGH DEDUCTIBLE					HIGH DEDUCTIBLE		
	AGE	AGE	PLAN A	PLAN B	PLAN C	PLAN D	PLAN E	PLAN F	PLAN F	PLAN G	PLAN H	PLAN I	PLAN J	PLAN J	PLAN K	PLAN L
17. MEDICO LIFE INS CO	65		\$1,952.00	----	\$3,559.00	----	----	\$3,625.00	----	\$3,192.00	----	----	----	----	----	----
Post Office Box 3477	66-69		2,057.00	----	3,765.00	----	----	3,835.00	----	3,402.00	----	----	----	----	----	----
Omaha, Nebraska 68103	70-72		2,247.00	----	4,141.00	----	----	4,218.00	----	3,787.00	----	----	----	----	----	----
Tel. No. (402) 391-6900	73-75		2,385.00	----	4,445.00	----	----	4,527.00	----	4,100.00	----	----	----	----	----	----
(800) 228-6080	76-79		2,469.00	----	4,685.00	----	----	4,771.00	----	4,357.00	----	----	----	----	----	----
Notes: Area rate factors apply-multiply rates to the right by .85 for South Carolina	80+		2,541.00	----	4,948.00	----	----	5,040.00	----	4,637.00	----	----	----	----	----	----
18. MUTUAL OF OMAHA INS CO	Area 1	65	\$1,079.44	----	\$1,309.17	\$1,201.00	----	\$1,327.15	----	\$920.77	----	----	----	----	----	----
Mutual of Omaha Plaza		70	1,279.74	----	1,552.44	1,424.07	----	1,573.63	----	1,091.79	----	----	----	----	----	----
Omaha, Nebraska 68175		75	1,488.67	----	1,805.59	1,656.78	----	1,830.31	----	1,269.92	----	----	----	----	----	----
Tel. No. (402) 342-7600		80+	1,714.10	----	2,078.94	1,907.28	----	2,107.58	----	1,462.32	----	----	----	----	----	----
(800) 316-0842																
Note: Standard rates are approximately 15% higher.																
Area 1 for Zip Codes 290-293, 296 & 297	Area 2	65	\$1,364.28	----	\$1,654.64	\$1,517.93	----	\$1,677.37	----	\$1,163.76	----	----	----	----	----	----
Area 2 for Zip Codes 294-295, 298-299		70	1,617.44	----	1,962.11	1,799.86	----	1,988.89	----	1,379.90	----	----	----	----	----	----
		75	1,881.52	----	2,282.06	2,093.37	----	2,313.30	----	1,605.05	----	----	----	----	----	----
		80+	2,166.43	----	2,627.56	2,410.60	----	2,663.76	----	1,848.22	----	----	----	----	----	----
19. NATIONAL STATES INS CO	65-67		\$1,208.00	\$1,635.00	\$2,596.00	----	----	\$1,952.00	----	----	----	----	----	----	----	----
1830 Craig Park Court	68-70		1,348.00	1,820.00	2,883.00	----	----	2,175.00	----	----	----	----	----	----	----	----
St. Louis, Missouri 63146	71-75		1,401.00	1,894.00	3,002.00	----	----	2,261.00	----	----	----	----	----	----	----	----
Tel. No. (314) 878-0101	76-80		1,575.00	2,126.00	3,367.00	----	----	2,535.00	----	----	----	----	----	----	----	----
(800) 868-6788	81+		1,901.00	2,567.00	4,073.00	----	----	3,070.00	----	----	----	----	----	----	----	----
20. NEW ERA LIFE INS CO	Area 1	65-69	\$820.76	\$1,344.92	\$1,494.36	----	----	\$1,569.08	\$560.40	----	----	----	----	----	----	----
Post Office Box 4884	Non-	70-74	929.38	1,484.53	1,649.47	----	----	1,732.00	635.04	----	----	----	----	----	----	----
Houston, Texas 77210-4884	Smoker	75-79	1,146.60	1,754.42	1,949.35	----	----	2,046.87	828.48	----	----	----	----	----	----	----
Tel. No. (281) 368-7200	Male	80-84	1,375.92	2,102.81	2,336.42	----	----	2,463.22	1,051.44	----	----	----	----	----	----	----
(800) 552-7879		85+	1,664.84	2,544.44	2,827.06	----	----	2,968.43	1,272.24	----	----	----	----	----	----	----
Add one time Non-Refundable \$20 Application Fee.																
If the spouse also submits an application, only one \$20 application fee is needed for both applications.	Area 1	65-69	\$759.28	\$1,244.12	\$1,382.35	----	----	\$1,451.52	\$518.40	----	----	----	----	----	----	----
	Non-	70-74	859.57	1,373.15	1,525.73	----	----	1,601.96	587.40	----	----	----	----	----	----	----
	Smoker	75-79	1,060.67	1,622.88	1,803.19	----	----	1,893.40	766.32	----	----	----	----	----	----	----
	Female	80-84	1,272.73	1,944.94	2,161.03	----	----	2,269.13	972.48	----	----	----	----	----	----	----
Plan A is for all Areas		85+	1,539.97	2,353.43	2,614.88	----	----	2,745.67	1,176.72	----	----	----	----	----	----	----
Area 1 for zip codes 294,295,298,299																
Area 2 for zip codes 290-293,296,297	Area 1	65-69	\$911.99	\$1,494.36	\$1,660.43	----	----	\$1,743.46	\$622.68	----	----	----	----	----	----	----
	Smoker	70-74	1,032.57	1,649.47	1,832.80	----	----	1,924.40	705.60	----	----	----	----	----	----	----
	Male	75-79	1,273.99	1,949.47	2,166.07	----	----	2,274.43	920.64	----	----	----	----	----	----	----
		80-84	1,528.76	2,336.42	2,595.98	----	----	2,725.76	1,168.20	0.00	----	----	----	----	----	----
		85+	1,849.81	2,827.06	3,141.18	----	----	3,298.30	1,413.48	----	----	----	----	----	----	----

**MEDICARE SUPPLEMENT INSURANCE
ANNUAL PREMIUM RATES AS OF JANUARY 1, 2006
COMPILED BY SOUTH CAROLINA DEPARTMENT OF INSURANCE**

COMPANY NAME	ISSUE	ATTAINED							HIGH DEDUCTIBLE					HIGH DEDUCTIBLE		
	AGE	AGE	PLAN A	PLAN B	PLAN C	PLAN D	PLAN E	PLAN F	PLAN F	PLAN G	PLAN H	PLAN I	PLAN J	PLAN J	PLAN K	PLAN L
20. Continued	Area 1	65-69	\$843.57	\$1,382.22	\$1,535.81	----	----	\$1,612.55	\$575.88	----	----	----	----	----	----	----
	Smoker	70-74	955.33	1,525.73	1,695.20	----	----	1,780.00	652.68	----	----	----	----	----	----	----
	Female	75-79	1,178.48	1,803.19	2,003.53	----	----	2,103.70	851.52	----	----	----	----	----	----	----
		80-84	1,414.10	2,161.15	2,401.31	----	----	2,521.39	1,080.60	----	----	----	----	----	----	----
		85+	1,711.08	2,615.00	2,905.56	----	----	3,050.84	1,307.52	----	----	----	----	----	----	----
	Area 2	65-69	\$820.76	\$1,102.37	\$1,224.85	----	----	\$1,286.08	\$459.36	----	----	----	----	----	----	----
	Non-	70-74	929.38	1,216.78	1,351.98	----	----	1,419.64	520.56	----	----	----	----	----	----	----
	Smoker	75-79	1,146.60	1,438.04	1,597.81	----	----	1,677.69	679.08	----	----	----	----	----	----	----
	Male	80-84	1,375.92	1,723.55	1,915.07	----	----	2,010.83	861.84	----	----	----	----	----	----	----
		85+	1,664.84	2,085.55	2,317.27	----	----	2,433.19	1,042.80	----	----	----	----	----	----	----
	Area 2	65-69	\$759.28	\$1,019.84	\$1,133.12	----	----	\$1,189.82	\$424.92	----	----	----	----	----	----	----
	Non-	70-74	859.57	1,125.56	1,250.55	----	----	1,313.05	481.44	----	----	----	----	----	----	----
	Smoker	75-79	1,060.67	1,330.18	1,477.98	----	----	1,551.94	628.20	----	----	----	----	----	----	----
	Female	80-84	1,272.73	1,594.15	1,771.31	----	----	1,859.89	797.04	----	----	----	----	----	----	----
		85+	1,539.97	1,928.93	2,143.26	----	----	2,250.49	964.44	----	----	----	----	----	----	----
	Area 2	65-69	\$911.99	\$1,224.97	\$1,361.05	----	----	\$1,429.09	\$510.36	----	----	----	----	----	----	----
	Smoker	70-74	1,032.57	1,352.11	1,502.30	----	----	1,577.39	578.40	----	----	----	----	----	----	----
	Male	75-79	1,273.99	1,597.93	1,775.47	----	----	1,864.30	754.56	----	----	----	----	----	----	----
		80-84	1,528.76	1,915.07	2,127.89	----	----	2,234.23	957.48	----	----	----	----	----	----	----
		85+	1,849.81	2,317.27	2,574.68	----	----	2,703.46	1,158.60	----	----	----	----	----	----	----
	Area 2	65-69	\$843.57	\$1,132.99	\$1,258.87	----	----	\$1,321.87	\$472.08	----	----	----	----	----	----	----
	Smoker	70-74	955.33	1,250.55	1,389.53	----	----	1,458.95	534.96	----	----	----	----	----	----	----
	Female	75-79	1,178.48	1,478.11	1,642.28	----	----	1,924.44	698.04	----	----	----	----	----	----	----
		80-84	1,414.10	1,771.43	1,968.25	----	----	2,066.65	885.72	----	----	----	----	----	----	----
		85+	1,711.08	2,143.39	2,381.53	----	----	2,500.60	1,071.72	----	----	----	----	----	----	----
21. ORDER OF UNITED COMMERCIAL TRAVELERS OF AMERICA	Smoker	65	\$1,061.89	\$1,370.10	\$1,644.58	\$1,506.18	----	\$1,689.95	----	\$1,402.66	----	----	----	----	----	----
632 North Park Street	Female	70	1,316.59	1,717.86	2,028.40	1,895.80	----	2,084.22	----	1,729.90	----	----	----	----	----	----
Post Office Box 159019	Zip 299	75	1,537.57	2,035.38	2,386.62	2,255.20	----	2,451.76	----	2,034.96	----	----	----	----	----	----
Columbus, Ohio 43215-8619		80	1,691.10	2,277.29	2,668.09	2,535.49	----	2,741.36	----	2,275.33	----	----	----	----	----	----
Tel. No. (800) 848-0123		85	1,791.13	2,451.76	2,878.60	2,739.04	----	2,957.69	----	2,454.88	----	----	----	----	----	----
		90	1,891.16	2,604.12	3,060.04	2,891.39	----	3,144.93	----	2,610.29	----	----	----	----	----	----
		95	1,991.18	2,727.41	3,204.25	3,003.05	----	3,292.65	----	2,732.90	----	----	----	----	----	----
	Smoker	65	\$955.70	\$1,233.09	\$1,480.12	\$1,355.56	----	\$1,520.96	----	\$1,262.39	----	----	----	----	----	----
	Female	70	1,184.93	1,546.07	1,825.56	1,706.22	----	1,875.80	----	1,556.91	----	----	----	----	----	----
	Zip 294-	75	1,383.81	1,831.84	2,147.96	2,029.68	----	2,206.58	----	1,831.46	----	----	----	----	----	----
	295, 298	80	1,521.99	2,049.56	2,401.28	2,281.94	----	2,467.22	----	2,047.80	----	----	----	----	----	----
		85	1,612.02	2,206.58	2,590.74	2,465.14	----	2,661.92	----	2,209.39	----	----	----	----	----	----
		90	1,702.04	2,343.71	2,754.04	2,602.25	----	2,830.44	----	2,349.26	----	----	----	----	----	----
		95	1,792.06	2,454.67	2,883.83	2,702.75	----	2,963.39	----	2,459.61	----	----	----	----	----	----

**MEDICARE SUPPLEMENT INSURANCE
ANNUAL PREMIUM RATES AS OF JANUARY 1, 2006
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COMPANY NAME	ISSUE	ATTAINED							HIGH DEDUCTIBLE					HIGH DEDUCTIBLE		
	AGE	AGE	PLAN A	PLAN B	PLAN C	PLAN D	PLAN E	PLAN F	PLAN F	PLAN G	PLAN H	PLAN I	PLAN J	PLAN J	PLAN K	PLAN L
21. Continued	Smoker	65	\$849.51	\$1,096.08	\$1,315.66	\$1,204.94	----	\$1,351.96	----	\$1,122.13	----	----	----	----	----	----
	Female	70	1,053.27	1,374.29	1,622.72	1,516.64	----	1,667.38	----	1,383.92	----	----	----	----	----	----
	All other	75	1,230.06	1,628.30	1,909.30	1,804.16	----	1,961.41	----	1,627.97	----	----	----	----	----	----
	Zip codes	80	1,352.88	1,821.83	2,134.47	2,028.39	----	2,193.09	----	1,820.26	----	----	----	----	----	----
		85	1,432.90	1,961.41	2,302.88	2,191.23	----	2,366.15	----	1,963.91	----	----	----	----	----	----
		90	1,512.93	2,083.30	2,448.03	2,313.11	----	2,515.94	----	2,088.23	----	----	----	----	----	----
		95	1,592.94	2,181.93	2,563.40	2,402.44	----	2,634.12	----	2,186.32	----	----	----	----	----	----
	Non-Smoker	65	\$904.88	\$1,167.72	\$1,400.33	\$1,281.71	----	\$1,438.73	----	\$1,194.15	----	----	----	----	----	----
	Female	70	1,121.20	1,463.14	1,727.16	1,614.34	----	1,774.84	----	1,473.12	----	----	----	----	----	----
	Zip	75	1,308.46	1,732.98	2,031.89	1,920.23	----	2,087.72	----	1,732.81	----	----	----	----	----	----
	299	80	1,439.89	1,938.84	2,272.63	2,158.66	----	2,334.28	----	1,937.45	----	----	----	----	----	----
		85	1,524.78	2,087.72	2,450.59	2,331.95	----	2,518.06	----	2,089.99	----	----	----	----	----	----
		90	1,610.85	2,216.81	2,606.44	2,462.23	----	2,677.39	----	2,222.23	----	----	----	----	----	----
		95	1,695.77	2,322.66	2,728.56	2,557.58	----	2,802.99	----	2,326.48	----	----	----	----	----	----
	Non-Smoker	65	\$814.39	\$1,050.95	\$1,260.30	\$1,153.54	----	\$1,294.86	----	\$1,074.73	----	----	----	----	----	----
	Female	70	1,009.08	1,316.83	1,554.44	1,452.91	----	1,597.36	----	1,325.81	----	----	----	----	----	----
	Zip 294-	75	1,177.61	1,559.68	1,828.70	1,728.21	----	1,878.95	----	1,559.53	----	----	----	----	----	----
	295, 298	80	1,295.90	1,744.96	2,045.37	1,942.79	----	2,100.85	----	1,743.71	----	----	----	----	----	----
		85	1,372.30	1,878.95	2,205.53	2,098.76	----	2,266.25	----	1,880.99	----	----	----	----	----	----
		90	1,449.77	1,995.13	2,345.80	2,216.01	----	2,409.65	----	2,000.01	----	----	----	----	----	----
		95	1,526.19	2,090.39	2,455.70	2,301.82	----	2,522.69	----	2,093.83	----	----	----	----	----	----
	Non-Smoker	65	\$723.90	\$934.18	\$1,120.26	\$1,025.37	----	\$1,150.98	----	\$955.32	----	----	----	----	----	----
	Female	70	896.96	1,170.51	1,381.73	1,291.47	----	1,419.87	----	1,178.49	----	----	----	----	----	----
	All other	75	1,046.77	1,386.38	1,625.51	1,536.18	----	1,670.18	----	1,386.25	----	----	----	----	----	----
	Zip codes	80	1,151.91	1,551.07	1,818.10	1,726.93	----	1,867.42	----	1,549.96	----	----	----	----	----	----
		85	1,219.82	1,670.18	1,960.47	1,865.56	----	2,014.45	----	1,671.99	----	----	----	----	----	----
		90	1,288.68	1,773.45	2,085.15	1,969.78	----	2,141.91	----	1,777.79	----	----	----	----	----	----
		95	1,356.62	1,858.13	2,182.85	2,046.06	----	2,242.39	----	1,861.19	----	----	----	----	----	----
	Smoker	65	\$1,221.17	\$1,575.62	\$1,891.27	\$1,732.11	----	\$1,943.44	----	\$1,613.06	----	----	----	----	----	----
	Male	70	1,514.08	1,975.54	2,332.66	2,180.17	----	2,396.85	----	1,989.39	----	----	----	----	----	----
	Zip 299	75	1,768.22	2,340.69	2,744.61	2,593.48	----	2,819.51	----	2,340.19	----	----	----	----	----	----
		80	1,944.75	2,618.88	3,068.29	2,915.81	----	3,152.56	----	2,616.62	----	----	----	----	----	----
		85	2,059.80	2,819.51	3,310.39	3,149.90	----	3,401.34	----	2,823.11	----	----	----	----	----	----
		90	2,174.83	2,994.74	3,519.05	3,325.10	----	3,616.67	----	3,001.84	----	----	----	----	----	----
		95	2,289.86	3,136.52	3,684.89	3,453.51	----	3,786.55	----	3,142.84	----	----	----	----	----	----

**MEDICARE SUPPLEMENT INSURANCE
ANNUAL PREMIUM RATES AS OF JANUARY 1, 2006
COMPILED BY SOUTH CAROLINA DEPARTMENT OF INSURANCE**

COMPANY NAME	ISSUE	ATTAINED							HIGH DEDUCTIBLE					HIGH DEDUCTIBLE		
	AGE	AGE	PLAN A	PLAN B	PLAN C	PLAN D	PLAN E	PLAN F	PLAN F	PLAN G	PLAN H	PLAN I	PLAN J	PLAN J	PLAN K	PLAN L
21. Continued	Smoker	65	\$1,099.05	\$1,418.06	\$1,702.14	\$1,558.90	----	\$1,749.10	----	\$1,451.75	----	----	----	----	----	----
	Male	70	1,362.67	1,777.99	2,099.39	1,962.15	----	2,157.17	----	1,790.45	----	----	----	----	----	----
	Zip 294-	75	1,591.40	2,106.62	2,470.15	2,334.13	----	2,537.56	----	2,106.17	----	----	----	----	----	----
	295, 298	80	1,750.28	2,356.99	2,761.46	2,624.23	----	2,837.30	----	2,354.96	----	----	----	----	----	----
		85	1,853.82	2,537.56	2,979.35	2,834.91	----	3,061.21	----	2,540.80	----	----	----	----	----	----
		90	1,957.35	2,695.27	3,167.15	2,992.59	----	3,255.00	----	2,701.65	----	----	----	----	----	----
		95	2,060.87	2,822.87	3,316.40	3,108.16	----	3,407.90	----	2,828.55	----	----	----	----	----	----
	Smoker	65	\$976.94	\$1,260.50	\$1,513.02	\$1,385.69	----	\$1,554.75	----	\$1,290.44	----	----	----	----	----	----
	Male	70	1,211.26	1,580.43	1,866.13	1,744.14	----	1,917.48	----	1,591.51	----	----	----	----	----	----
	All other	75	1,414.58	1,872.55	2,195.69	2,074.78	----	2,255.61	----	1,872.15	----	----	----	----	----	----
	Zip codes	80	1,555.80	2,095.10	2,454.63	2,332.65	----	2,522.05	----	2,093.30	----	----	----	----	----	----
		85	1,647.84	2,255.61	2,648.31	2,519.92	----	2,721.07	----	2,258.49	----	----	----	----	----	----
		90	1,739.86	2,395.79	2,815.24	2,660.08	----	2,893.34	----	2,401.47	----	----	----	----	----	----
		95	1,831.89	2,509.22	2,947.91	2,762.81	----	3,029.24	----	2,514.27	----	----	----	----	----	----
	Non-Smoker	65	\$1,040.61	\$1,342.88	\$1,610.38	\$1,473.97	----	\$1,654.54	----	\$1,373.27	----	----	----	----	----	----
	Male	70	1,289.38	1,682.61	1,986.23	1,856.49	----	2,041.07	----	1,694.09	----	----	----	----	----	----
	Zip	75	1,504.73	1,992.93	2,336.67	2,208.28	----	2,400.88	----	1,992.73	----	----	----	----	----	----
	299	80	1,655.87	2,229.67	2,613.52	2,482.46	----	2,684.42	----	2,228.07	----	----	----	----	----	----
		85	1,753.50	2,400.88	2,818.18	2,681.74	----	2,895.77	----	2,403.49	----	----	----	----	----	----
		90	1,852.48	2,549.33	2,997.41	2,831.56	----	3,079.00	----	2,555.57	----	----	----	----	----	----
		95	1,950.12	2,671.06	3,137.86	2,941.22	----	3,223.44	----	2,675.46	----	----	----	----	----	----
	Non-Smoker	65	\$936.55	\$1,208.59	\$1,449.34	\$1,326.57	----	\$1,489.09	----	\$1,235.94	----	----	----	----	----	----
	Male	70	1,160.44	1,514.35	1,787.61	1,670.84	----	1,836.96	----	1,524.68	----	----	----	----	----	----
	Zip 294-	75	1,354.26	1,793.64	2,103.00	1,987.45	----	2,160.79	----	1,793.46	----	----	----	----	----	----
	295, 298	80	1,490.28	2,006.70	2,352.17	2,234.21	----	2,415.98	----	2,005.26	----	----	----	----	----	----
		85	1,578.15	2,160.79	2,536.36	2,413.57	----	2,606.19	----	2,163.14	----	----	----	----	----	----
		90	1,667.23	2,294.40	2,697.67	2,548.40	----	2,771.10	----	2,300.01	----	----	----	----	----	----
		95	1,755.11	2,403.95	2,824.07	2,647.10	----	2,901.10	----	2,407.91	----	----	----	----	----	----
	Non-Smoker	65	\$832.49	\$1,074.30	\$1,288.30	\$1,179.18	----	\$1,323.63	----	\$1,098.61	----	----	----	----	----	----
	Male	70	1,031.50	1,346.09	1,588.98	1,485.19	----	1,632.86	----	1,355.27	----	----	----	----	----	----
	All other	75	1,203.78	1,594.34	1,869.34	1,766.62	----	1,920.70	----	1,594.18	----	----	----	----	----	----
	Zip codes	80	1,324.70	1,783.74	2,090.82	1,985.97	----	2,147.54	----	1,782.45	----	----	----	----	----	----
		85	1,402.80	1,920.70	2,254.54	2,145.39	----	2,316.62	----	1,922.79	----	----	----	----	----	----
		90	1,481.98	2,039.46	2,397.93	2,265.25	----	2,463.20	----	2,044.46	----	----	----	----	----	----
		95	1,560.10	2,136.85	2,510.29	2,352.98	----	2,578.75	----	2,140.36	----	----	----	----	----	----

**MEDICARE SUPPLEMENT INSURANCE
ANNUAL PREMIUM RATES AS OF JANUARY 1, 2006
COMPILED BY SOUTH CAROLINA DEPARTMENT OF INSURANCE**

COMPANY NAME	ISSUE	ATTAINED							HIGH DEDUCTIBLE					HIGH DEDUCTIBLE		
	AGE	AGE	PLAN A	PLAN B	PLAN C	PLAN D	PLAN E	PLAN F	PLAN F	PLAN G	PLAN H	PLAN I	PLAN J	PLAN J	PLAN K	PLAN L
22. OXFORD LIFE INS CO	Group	65	\$949.76	\$1,229.19	\$1,470.45	----	----	\$1,530.01	----	----	----	----	----	----	----	----
2721 N. Central Avenue		70	1,122.31	1,450.60	1,742.25	----	----	1,812.48	----	----	----	----	----	----	----	----
Phoenix, AZ 85004		75	1,242.93	1,630.78	1,972.82	----	----	2,050.69	----	----	----	----	----	----	----	----
Tel. No. (888) 757-3732 Ext. 4431		80	1,317.75	1,760.57	2,145.36	----	----	2,227.82	----	----	----	----	----	----	----	----
		85+	1,401.74	1,940.75	2,403.43	----	----	2,488.93	----	----	----	----	----	----	----	----
Note: Smoker premiums are 115% of non-smoker premiums.	Individual	65	\$2,292.04	\$2,967.00	\$3,551.95	\$3,312.92	----	\$3,698.19	----	----	----	----	----	----	----	----
		70	2,708.26	3,501.33	4,210.06	3,925.98	----	4,381.59	----	----	----	----	----	----	----	----
		75	2,997.93	3,934.45	4,766.88	4,463.18	----	4,955.34	----	----	----	----	----	----	----	----
		80	3,180.74	4,246.61	5,183.11	4,896.23	----	5,382.80	----	----	----	----	----	----	----	----
		85+	3,383.23	4,682.51	5,807.44	5,396.86	----	6,012.74	----	----	----	----	----	----	----	----
23. PACIFICARE LIFE AND HEALTH INS CO	Area 1	65	\$1,068.00	----	\$1,452.00	----	----	\$1,464.00	\$612.00	\$1,260.00	----	----	----	----	----	----
P. O. Box 60472	Standard	70	1,332.00	----	1,824.00	----	----	1,836.00	888.00	1,524.00	----	----	----	----	----	----
Cypress, CA 90630	Non-Smoker	75	1,620.00	----	2,112.00	----	----	2,136.00	1,128.00	1,812.00	----	----	----	----	----	----
Tel. No. (800) 924-4727	Smoker	80	1,836.00	----	2,364.00	----	----	2,376.00	1,332.00	2,292.00	----	----	----	----	----	----
www.SecureHorizons.com	Male	85	1,848.00	----	2,448.00	----	----	2,448.00	1,392.00	2,352.00	----	----	----	----	----	----
		90	1,848.00	----	2,448.00	----	----	2,448.00	1,392.00	2,352.00	----	----	----	----	----	----
Notes:		95	1,848.00	----	2,448.00	----	----	2,448.00	1,392.00	2,352.00	----	----	----	----	----	----
These are Annual Rates.																
These rates do not include a one time policy fee of \$25 at time of issue. Open enrollees will receive rates based on their Smoker/Female status at the time of the application.	Non-Smoker	65	\$1,068.00	----	\$1,452.00	----	----	\$1,464.00	\$612.00	\$1,260.00	----	----	----	----	----	----
These rates are for an area with a 1.00 area factor.	Smoker	70	1,332.00	----	1,824.00	----	----	1,836.00	888.00	1,524.00	----	----	----	----	----	----
Area 1: Zip Codes: Aiken, Berkeley, Charleston, Dorchester, Edgefield, Florence, Horry, and Marion Counties.	Female	75	1,620.00	----	2,112.00	----	----	2,136.00	1,128.00	1,812.00	----	----	----	----	----	----
	Smoker	80	1,836.00	----	2,364.00	----	----	2,376.00	1,332.00	2,292.00	----	----	----	----	----	----
	Male	85	1,848.00	----	2,448.00	----	----	2,448.00	1,392.00	2,352.00	----	----	----	----	----	----
		90	1,848.00	----	2,448.00	----	----	2,448.00	1,392.00	2,352.00	----	----	----	----	----	----
		95	1,848.00	----	2,448.00	----	----	2,448.00	1,392.00	2,352.00	----	----	----	----	----	----
	Smoker	65	\$1,228.20	----	\$1,669.80	----	----	\$1,683.60	\$703.80	\$1,449.00	----	----	----	----	----	----
	Male	70	1,531.80	----	2,097.60	----	----	2,111.40	1,021.20	1,752.60	----	----	----	----	----	----
		75	1,863.00	----	2,428.80	----	----	2,456.40	1,297.20	2,083.80	----	----	----	----	----	----
		80	2,111.40	----	2,718.60	----	----	2,732.40	1,531.80	2,635.80	----	----	----	----	----	----
		85	2,125.20	----	2,815.20	----	----	2,815.20	1,600.80	2,704.80	----	----	----	----	----	----
		90	2,125.20	----	2,815.20	----	----	2,815.20	1,600.80	2,704.80	----	----	----	----	----	----
		95	2,125.20	----	2,815.20	----	----	2,815.20	1,600.80	2,704.80	----	----	----	----	----	----
	Smoker	65	\$1,228.20	----	\$1,669.80	----	----	\$1,683.60	\$703.80	\$1,449.00	----	----	----	----	----	----
	Female	70	1,531.80	----	2,097.60	----	----	2,111.40	1,021.20	1,752.60	----	----	----	----	----	----
		75	1,863.00	----	2,428.80	----	----	2,456.40	1,297.20	2,083.80	----	----	----	----	----	----
		80	2,111.40	----	2,718.60	----	----	2,732.40	1,531.80	2,635.80	----	----	----	----	----	----
		85	2,125.20	----	2,815.20	----	----	2,815.20	1,600.80	2,704.80	----	----	----	----	----	----
		90	2,125.20	----	2,815.20	----	----	2,815.20	1,600.80	2,704.80	----	----	----	----	----	----
		95	2,125.20	----	2,815.20	----	----	2,815.20	1,600.80	2,704.80	----	----	----	----	----	----

**MEDICARE SUPPLEMENT INSURANCE
ANNUAL PREMIUM RATES AS OF JANUARY 1, 2006
COMPILED BY SOUTH CAROLINA DEPARTMENT OF INSURANCE**

COMPANY NAME	ISSUE	ATTAINED							HIGH DEDUCTIBLE					HIGH DEDUCTIBLE		
	AGE	AGE	PLAN A	PLAN B	PLAN C	PLAN D	PLAN E	PLAN F	PLAN F	PLAN G	PLAN H	PLAN I	PLAN J	PLAN J	PLAN K	PLAN L
23. Continued	Area 2	65	\$984.00	----	\$1,392.00	----	----	\$1,404.00	\$576.00	\$1,176.00	----	----	----	----	----	----
Area 2: Rest of State - All other counties.	Standard	70	1,212.00	----	1,644.00	----	----	1,656.00	756.00	1,404.00	----	----	----	----	----	----
	Non-Smoker	75	1,464.00	----	1,920.00	----	----	1,956.00	996.00	1,656.00	----	----	----	----	----	----
	Smoker	80	1,560.00	----	2,268.00	----	----	2,280.00	1,248.00	2,148.00	----	----	----	----	----	----
	Male	85	1,560.00	----	2,328.00	----	----	2,340.00	1,296.00	2,208.00	----	----	----	----	----	----
		90	1,560.00	----	2,328.00	----	----	2,340.00	1,296.00	2,208.00	----	----	----	----	----	----
		95	1,560.00	----	2,328.00	----	----	2,340.00	1,296.00	2,208.00	----	----	----	----	----	----
	Non-Smoker	65	\$984.00	----	\$1,392.00	----	----	\$1,404.00	\$576.00	\$1,176.00	----	----	----	----	----	----
	Smoker	70	1,212.00	----	1,644.00	----	----	1,656.00	756.00	1,404.00	----	----	----	----	----	----
	Female	75	1,464.00	----	1,920.00	----	----	1,956.00	996.00	1,656.00	----	----	----	----	----	----
		80	1,560.00	----	2,268.00	----	----	2,280.00	1,248.00	2,148.00	----	----	----	----	----	----
		85	1,560.00	----	2,328.00	----	----	2,340.00	1,296.00	2,208.00	----	----	----	----	----	----
		90	1,560.00	----	2,328.00	----	----	2,340.00	1,296.00	2,208.00	----	----	----	----	----	----
		95	1,560.00	----	2,328.00	----	----	2,340.00	1,296.00	2,208.00	----	----	----	----	----	----
	Smoker	65	\$1,131.60	----	\$1,600.80	----	----	\$1,614.60	\$662.40	\$1,352.40	----	----	----	----	----	----
	Male	70	1,393.80	----	1,890.60	----	----	1,904.40	869.40	1,614.60	----	----	----	----	----	----
		75	1,683.60	----	2,208.00	----	----	2,249.40	1,145.40	1,904.40	----	----	----	----	----	----
		80	1,794.00	----	2,608.20	----	----	2,622.00	1,435.20	2,470.20	----	----	----	----	----	----
		85	1,794.00	----	2,677.20	----	----	2,691.00	1,490.40	2,539.20	----	----	----	----	----	----
		90	1,794.00	----	2,677.20	----	----	2,691.00	1,490.40	2,539.20	----	----	----	----	----	----
		95	1,794.00	----	2,677.20	----	----	2,691.00	1,490.40	2,539.20	----	----	----	----	----	----
	Smoker	65	\$1,131.60	----	\$1,600.80	----	----	\$1,614.60	\$662.40	\$1,352.40	----	----	----	----	----	----
	Female	70	1,393.80	----	1,890.60	----	----	1,904.40	869.40	1,614.60	----	----	----	----	----	----
		75	1,683.60	----	2,208.00	----	----	2,249.40	1,145.40	1,904.40	----	----	----	----	----	----
		80	1,794.00	----	2,608.20	----	----	2,622.00	1,435.20	2,470.20	----	----	----	----	----	----
		85	1,794.00	----	2,677.20	----	----	2,691.00	1,490.40	2,539.20	----	----	----	----	----	----
		90	1,794.00	----	2,677.20	----	----	2,691.00	1,490.40	2,539.20	----	----	----	----	----	----
		95	1,794.00	----	2,677.20	----	----	2,691.00	1,490.40	2,539.20	----	----	----	----	----	----

**MEDICARE SUPPLEMENT INSURANCE
ANNUAL PREMIUM RATES AS OF JANUARY 1, 2006
COMPILED BY SOUTH CAROLINA DEPARTMENT OF INSURANCE**

COMPANY NAME	ISSUE	ATTAINED							HIGH DEDUCTIBLE					HIGH DEDUCTIBLE		
	AGE	AGE	PLAN A	PLAN B	PLAN C	PLAN D	PLAN E	PLAN F	PLAN F	PLAN G	PLAN H	PLAN I	PLAN J	PLAN J	PLAN K	PLAN L
24. PENNSYLVANIA LIFE INS CO	Standard	65	\$966.61	\$1,315.05	\$1,478.68	\$1,372.65	----	\$1,598.88	----	----	----	----	----	----	----	----
1001 Heathrow Park Lane	Non-	70	1,139.18	1,562.21	1,732.45	1,633.20	----	1,872.06	----	----	----	----	----	----	----	----
Lake Mary, FL 32746	Smoker	75	1,326.41	1,841.31	2,018.94	1,929.84	----	2,183.08	----	----	----	----	----	----	----	----
Tel. No. (407) 995-8000	Female	80	1,452.74	2,050.63	2,240.01	2,156.54	----	2,418.42	----	----	----	----	----	----	----	----
1- (800) -275-7366		85	1,533.94	2,196.09	2,394.53	2,315.58	----	2,586.35	----	----	----	----	----	----	----	----
www.pennlife.com		90	1,614.02	2,320.26	2,525.37	2,448.67	----	2,725.89	----	----	----	----	----	----	----	----
Standard:		95	1,694.11	2,418.42	2,620.11	2,550.18	----	2,831.14	----	----	----	----	----	----	----	----
Area 1 for Zip Code 299 - Factor 1.0		99	1,757.27	2,489.37	2,688.91	2,620.11	----	2,904.47	----	----	----	----	----	----	----	----
Area 2 for Zip Codes 294-295,298 - Factor 95																
Area 2 for Rest of State - Factor 0.8	Standard	65	\$1,068.12	\$1,452.23	\$1,634.33	\$1,514.77	----	\$1,765.62	----	----	----	----	----	----	----	----
	Non-	70	1,257.61	1,725.41	1,911.79	1,802.38	----	2,067.18	----	----	----	----	----	----	----	----
	Smoker	75	1,464.01	2,032.89	2,229.86	2,130.60	----	2,408.96	----	----	----	----	----	----	----	----
	Male	80	1,603.87	2,263.50	2,472.36	2,381.00	----	2,670.31	----	----	----	----	----	----	----	----
Notes:		85	1,694.11	2,424.33	2,643.80	2,556.95	----	2,855.98	----	----	----	----	----	----	----	----
These rates do not include a one time policy		90	1,782.08	2,562.69	2,788.17	2,704.70	----	3,009.72	----	----	----	----	----	----	----	----
fee of \$25 at time of issue. Open enrollees		95	1,870.06	2,670.31	2,893.06	2,815.24	----	3,125.61	----	----	----	----	----	----	----	----
will receive rates based on their Smoker/		99	1,939.99	2,748.36	2,967.50	2,891.94	----	3,207.21	----	----	----	----	----	----	----	----
Non-Smoker status at the time of the application																
These rates are for an area with a 1.00 area factor.	Standard	65	\$1,115.49	\$1,517.28	\$1,707.64	\$1,583.57	----	\$1,844.86	----	----	----	----	----	----	----	----
		70	1,315.13	1,803.47	1,997.51	1,883.59	----	2,159.43	----	----	----	----	----	----	----	----
	Smoker	75	1,529.43	2,123.95	2,330.24	2,225.35	----	2,518.94	----	----	----	----	----	----	----	----
	Female	80	1,676.06	2,365.20	2,582.89	2,488.15	----	2,792.12	----	----	----	----	----	----	----	----
		85	1,769.68	2,533.13	2,763.36	2,672.00	----	2,983.70	----	----	----	----	----	----	----	----
		90	1,862.16	2,677.41	2,913.37	2,826.52	----	3,145.72	----	----	----	----	----	----	----	----
		95	1,952.39	2,790.94	3,023.90	2,941.56	----	3,266.34	----	----	----	----	----	----	----	----
		99	2,026.84	2,872.54	3,101.73	3,022.77	----	3,351.49	----	----	----	----	----	----	----	----
	Standard	65	\$1,231.67	\$1,675.74	\$1,884.72	\$1,748.25	----	\$2,037.62	----	----	----	----	----	----	----	----
		70	1,451.61	1,990.32	2,206.17	2,080.98	----	2,384.12	----	----	----	----	----	----	----	----
	Smoker	75	1,688.47	2,345.10	2,571.61	2,457.69	----	2,780.29	----	----	----	----	----	----	----	----
	Male	80	1,850.88	2,612.36	2,852.46	2,746.44	----	3,081.86	----	----	----	----	----	----	----	----
		85	1,954.65	2,796.85	3,050.97	2,950.59	----	3,293.54	----	----	----	----	----	----	----	----
		90	2,056.16	2,956.50	3,215.64	3,120.90	----	3,473.30	----	----	----	----	----	----	----	----
		95	2,156.54	3,081.86	3,338.58	3,248.35	----	3,605.75	----	----	----	----	----	----	----	----
		99	2,237.75	3,171.73	3,424.30	3,337.46	----	3,701.54	----	----	----	----	----	----	----	----

**MEDICARE SUPPLEMENT INSURANCE
ANNUAL PREMIUM RATES AS OF JANUARY 1, 2006
COMPILED BY SOUTH CAROLINA DEPARTMENT OF INSURANCE**

COMPANY NAME	ISSUE	ATTAINED							HIGH DEDUCTIBLE					HIGH DEDUCTIBLE		
	AGE	AGE	PLAN A	PLAN B	PLAN C	PLAN D	PLAN E	PLAN F	PLAN F	PLAN G	PLAN H	PLAN I	PLAN J	PLAN J	PLAN K	PLAN L
25. PHYSICIANS LIFE INS CO	Area E	65	\$907.80	\$1,034.40	---	---	---	\$1,330.80	---	\$1,131.00	---	---	---	---	---	---
2600 Dodge Street	Non-	70	1,044.00	1,230.60	---	---	---	1,593.00	---	1,353.60	---	---	---	---	---	---
Omaha, Nebraska 68131	Tobacco	75	1,131.00	1,365.60	---	---	---	1,829.40	---	1,555.20	---	---	---	---	---	---
Tel. No. (402) 633-1000		80	1,203.00	1,524.60	---	---	---	2,081.40	---	1,769.40	---	---	---	---	---	---
(800) 228-9100																
	Area E	65	\$1,016.64	\$1,158.48	---	---	---	\$1,490.40	---	\$1,266.72	---	---	---	---	---	---
Area E Zip Codes: 290-291, 293, 296-298	Tobacco	70	1,169.28	1,378.20	---	---	---	1,784.16	---	1,515.96	---	---	---	---	---	---
Area F Zip Codes: 292,294-295, 299		75	1,266.72	1,529.40	---	---	---	2,048.88	---	1,741.80	---	---	---	---	---	---
		80	1,347.36	1,707.48	---	---	---	2,331.12	---	1,981.68	---	---	---	---	---	---
Issue age rates are also available.	Area F	65	\$955.80	\$1,089.00	---	---	---	\$1,401.00	---	\$1,190.40	---	---	---	---	---	---
www.physiciansmutual.com	Non-	70	1,099.20	1,295.40	---	---	---	1,677.00	---	1,425.00	---	---	---	---	---	---
	Tobacco	75	1,190.40	1,437.60	---	---	---	1,925.40	---	1,636.80	---	---	---	---	---	---
		80	1,266.60	1,605.00	---	---	---	2,191.20	---	1,862.40	---	---	---	---	---	---
	Area F	65	\$1,070.40	\$1,219.68	---	---	---	\$1,569.12	---	\$1,333.20	---	---	---	---	---	---
	Tobacco	70	1,231.08	1,450.80	---	---	---	1,878.24	---	1,596.00	---	---	---	---	---	---
		75	1,333.20	1,610.04	---	---	---	2,156.40	---	1,833.12	---	---	---	---	---	---
		80	1,418.52	1,797.60	---	---	---	2,454.12	---	2,085.84	---	---	---	---	---	---
26. PROVIDENT AMERICAN LIFE & HEALTH	Female	65	\$1,147.00	---	---	\$1,253.00	---	\$1,392.00	\$496.00	---	---	---	---	---	---	---
INSURANCE COMPANY		70	1,388.00	---	---	1,517.00	---	1,685.00	600.00	---	---	---	---	---	---	---
6201 Johnson Drive; P.O. Box 29158		75	1,601.00	---	---	1,746.00	---	1,940.00	692.00	---	---	---	---	---	---	---
Mission, Kansas 66202		80	1,752.00	---	---	1,913.00	---	2,125.00	758.00	---	---	---	---	---	---	---
Tel. No. (800) 753-5133		85	1,888.00	---	---	2,062.00	---	2,291.00	818.00	---	---	---	---	---	---	---
*The Following Apply:																
1. Area Factors: Zips 294-295, 298-299 .80																
All other Zips .75																
2. Males - add 15%																
3. All adjustment factors are multiplicative.																
4. Add an additional \$25.00 administrative fee to the initial premium.																
5. Modal Factors Semi-Annual 0.520, Quarterly 0.265, Monthly Bank Draft 0.085																

**MEDICARE SUPPLEMENT INSURANCE
ANNUAL PREMIUM RATES AS OF JANUARY 1, 2006
COMPILED BY SOUTH CAROLINA DEPARTMENT OF INSURANCE**

COMPANY NAME	ISSUE	ATTAINED							HIGH DEDUCTIBLE					HIGH DEDUCTIBLE		
	AGE	AGE	PLAN A	PLAN B	PLAN C	PLAN D	PLAN E	PLAN F	PLAN F	PLAN G	PLAN H	PLAN I	PLAN J	PLAN J	PLAN K	PLAN L
27. PYRAMID LIFE INS CO	Standard	65	\$1,790.50	\$1,729.08	\$2,283.19	\$1,731.75	\$1,390.35	\$2,233.79	\$606.18	\$1,841.24	---	---	---	---	---	---
1001 Heathrow Park Lane	Non-Smoker	70	2,233.79	2,155.01	2,847.98	2,156.35	1,779.05	2,786.56	687.63	2,291.20	---	---	---	---	---	---
Lake Mary, FL 32746	Smoker	75	2,456.77	2,406.03	3,168.43	2,408.70	2,116.00	3,096.33	827.82	2,560.91	---	---	---	---	---	---
Tel. No. (407) 995-8000	Female	80	2,604.98	2,602.30	3,411.44	2,610.32	2,401.20	3,336.66	927.96	2,777.22	---	---	---	---	---	---
(800) -777-1126		85	2,710.46	2,763.86	3,599.70	2,775.88	2,639.25	3,518.25	1,010.75	2,957.47	---	---	---	---	---	---
		90	2,794.57	2,910.74	3,763.93	2,929.43	2,830.15	3,681.15	1,089.52	3,125.70	---	---	---	---	---	---
Standard:		95	2,878.69	3,065.62	3,942.85	3,088.32	2,976.20	3,856.06	1,172.31	3,300.61	---	---	---	---	---	---
Area 1 for Zip Code 297 - Factor 0.90		99	2,950.79	3,197.80	4,101.73	3,227.18	3,061.30	4,008.27	1,244.41	3,452.83	---	---	---	---	---	---
Area 2 for Rest of State - Factor 0.85																
	Standard	65	\$1,790.50	\$1,729.08	\$2,283.19	\$1,731.75	\$1,529.50	\$2,233.79	\$606.18	\$1,841.24	---	---	---	---	---	---
	Non-Smoker	70	2,233.79	2,155.01	2,847.98	2,156.35	1,957.30	2,786.56	687.63	2,291.20	---	---	---	---	---	---
	Smoker	75	2,456.77	2,406.03	3,168.43	2,408.70	2,327.60	3,096.33	827.82	2,560.91	---	---	---	---	---	---
Select:		Male	80	2,604.98	2,602.30	3,411.44	2,610.32	2,641.55	3,336.66	927.96	2,777.22	---	---	---	---	---
Area 1 for Zip Code 297 - Factor 0.80		85	2,710.46	2,763.86	3,599.70	2,775.88	2,903.75	3,518.25	1,010.75	2,957.47	---	---	---	---	---	---
Area 2 for Rest of State - Factor 0.85		90	2,794.57	2,910.74	3,763.93	2,929.43	3,113.05	3,681.15	1,089.52	3,125.70	---	---	---	---	---	---
		95	2,878.69	3,065.62	3,942.85	3,088.32	3,272.90	3,856.06	1,172.31	3,300.61	---	---	---	---	---	---
		99	2,950.79	3,197.80	4,101.73	3,227.18	3,367.20	4,008.27	1,244.41	3,452.83	---	---	---	---	---	---
	Standard	65	\$1,790.50	\$1,729.08	\$2,283.19	\$1,731.75	\$1,599.65	\$2,233.79	\$606.18	\$1,841.24	---	---	---	---	---	---
		70	2,233.79	2,155.01	2,847.98	2,156.35	2,045.85	2,786.56	687.63	2,291.20	---	---	---	---	---	---
	Smoker	75	2,456.77	2,406.03	3,168.43	2,408.70	2,433.40	3,096.33	827.82	2,560.91	---	---	---	---	---	---
	Female	80	2,604.98	2,602.30	3,411.44	2,610.32	2,762.30	3,336.66	927.96	2,777.22	---	---	---	---	---	---
		85	2,710.46	2,763.86	3,599.70	2,775.88	3,034.85	3,518.25	1,010.75	2,957.47	---	---	---	---	---	---
		90	2,794.57	2,910.74	3,763.93	2,929.43	3,254.50	3,681.15	1,089.52	3,125.70	---	---	---	---	---	---
		95	2,878.69	3,065.62	3,942.85	3,088.32	3,422.40	3,856.06	1,172.31	3,300.61	---	---	---	---	---	---
		99	2,950.79	3,197.80	4,101.73	3,227.18	3,520.15	4,008.27	1,244.41	3,452.83	---	---	---	---	---	---
	Standard	65	\$1,790.50	\$1,729.08	\$2,283.19	\$1,731.75	\$1,759.50	\$2,233.79	\$606.18	\$1,841.24	---	---	---	---	---	---
		70	2,233.79	2,155.01	2,847.98	2,156.35	2,250.55	2,786.56	687.63	2,291.20	---	---	---	---	---	---
	Smoker	75	2,456.77	2,406.03	3,168.43	2,408.70	2,676.05	3,096.33	827.82	2,560.91	---	---	---	---	---	---
	Male	80	2,604.98	2,602.30	3,411.44	2,610.32	3,038.30	3,336.66	927.96	2,777.22	---	---	---	---	---	---
		85	2,710.46	2,763.86	3,599.70	2,775.88	3,338.45	3,518.25	1,010.75	2,957.47	---	---	---	---	---	---
		90	2,794.57	2,910.74	3,763.93	2,929.43	3,579.95	3,681.15	1,089.52	3,125.70	---	---	---	---	---	---
		95	2,878.69	3,065.62	3,942.85	3,088.32	3,763.95	3,856.06	1,172.31	3,300.61	---	---	---	---	---	---
		99	2,950.79	3,197.80	4,101.73	3,227.18	3,872.05	4,008.27	1,244.41	3,452.83	---	---	---	---	---	---
	Select	65	---	\$1,321.85	\$1,870.62	\$1,395.28	\$1,159.20	\$1,926.69	---	\$1,559.51	---	---	---	---	---	---
	Non-Smoker	70	---	1,646.30	2,333.93	1,735.76	1,477.75	2,400.69	---	1,842.58	---	---	---	---	---	---
	Smoker	75	---	1,956.07	2,715.80	2,061.55	1,738.80	2,670.40	---	2,165.69	---	---	---	---	---	---
	Female	80	---	2,147.00	2,954.80	2,267.17	1,945.80	2,876.02	---	2,384.67	---	---	---	---	---	---
		85	---	2,287.20	3,120.36	2,418.05	2,097.60	3,034.91	---	2,546.23	---	---	---	---	---	---
		90	---	2,412.71	3,264.56	2,556.91	2,198.80	3,173.77	---	2,697.10	---	---	---	---	---	---
		95	---	2,546.23	3,419.45	2,702.44	2,248.25	3,324.65	---	2,851.99	---	---	---	---	---	---
		99	---	2,654.38	3,554.30	2,822.61	2,255.15	3,454.16	---	2,986.84	---	---	---	---	---	---

**MEDICARE SUPPLEMENT INSURANCE
ANNUAL PREMIUM RATES AS OF JANUARY 1, 2006
COMPILED BY SOUTH CAROLINA DEPARTMENT OF INSURANCE**

COMPANY NAME	ISSUE	ATTAINED							HIGH DEDUCTIBLE					HIGH DEDUCTIBLE		
	AGE	AGE	PLAN A	PLAN B	PLAN C	PLAN D	PLAN E	PLAN F	PLAN F	PLAN G	PLAN H	PLAN I	PLAN J	PLAN J	PLAN K	PLAN L
27. Continued																
	Select	65	---	\$1,321.85	\$1,870.62	\$1,395.28	\$1,274.20	\$1,926.69	---	\$1,559.51	---	---	---	---	---	---
	Non-Smoker	70	---	1,646.30	2,333.93	1,735.76	1,624.95	2,400.69	---	1,842.58	---	---	---	---	---	---
	Smoker	75	---	1,956.07	2,715.80	2,061.55	1,912.45	2,670.40	---	2,165.69	---	---	---	---	---	---
	Male	80	---	2,147.00	2,954.80	2,267.17	2,140.15	2,876.02	---	2,384.67	---	---	---	---	---	---
		85	---	2,287.20	3,120.36	2,418.05	2,308.05	3,034.91	---	2,546.23	---	---	---	---	---	---
		90	---	2,412.71	3,264.56	2,556.91	2,418.45	3,173.77	---	2,697.10	---	---	---	---	---	---
		95	---	2,546.23	3,419.45	2,702.44	2,473.65	3,324.65	---	2,851.99	---	---	---	---	---	---
		99	---	2,654.38	3,554.30	2,822.61	2,480.55	3,454.16	---	2,986.84	---	---	---	---	---	---
	Select	65	---	\$1,321.85	\$1,870.62	\$1,395.28	\$1,332.85	\$1,926.69	---	\$1,559.51	---	---	---	---	---	---
		70	---	1,646.30	2,333.93	1,735.76	1,698.55	2,400.69	---	1,842.58	---	---	---	---	---	---
	Smoker	75	---	1,956.07	2,715.80	2,061.55	1,999.85	2,670.40	---	2,165.69	---	---	---	---	---	---
	Female	80	---	2,147.00	2,954.80	2,267.17	2,236.75	2,876.02	---	2,384.67	---	---	---	---	---	---
		85	---	2,287.20	3,120.36	2,418.05	2,412.70	3,034.91	---	2,546.23	---	---	---	---	---	---
		90	---	2,412.71	3,264.56	2,556.91	2,527.70	3,173.77	---	2,697.10	---	---	---	---	---	---
		95	---	2,546.23	3,419.45	2,702.44	2,586.35	3,324.65	---	2,851.99	---	---	---	---	---	---
		99	---	2,654.38	3,554.30	2,822.61	2,593.25	3,454.16	---	2,986.84	---	---	---	---	---	---
	Select	65	---	\$1,321.85	\$1,870.62	\$1,395.28	\$1,466.25	\$1,926.69	---	\$1,559.51	---	---	---	---	---	---
		70	---	1,646.30	2,333.93	1,735.76	1,868.75	2,400.69	---	1,842.58	---	---	---	---	---	---
	Smoker	75	---	1,956.07	2,715.80	2,061.55	2,199.95	2,670.40	---	2,165.69	---	---	---	---	---	---
	Male	80	---	2,147.00	2,954.80	2,267.17	2,461.00	2,876.02	---	2,384.67	---	---	---	---	---	---
		85	---	2,287.20	3,120.36	2,418.05	2,654.20	3,034.91	---	2,546.23	---	---	---	---	---	---
		90	---	2,412.71	3,264.56	2,556.91	2,780.70	3,173.77	---	2,697.10	---	---	---	---	---	---
		95	---	2,546.23	3,419.45	2,702.44	2,843.95	3,324.65	---	2,851.99	---	---	---	---	---	---
		99	---	2,654.38	3,554.30	2,822.61	2,853.15	3,454.16	---	2,986.84	---	---	---	---	---	---
28. STANDARD LIFE & ACCIDENT INS CO	Standard	65-69	\$2,393.20	\$1,621.66	\$1,865.65	\$1,224.03	\$1,156.71	\$1,876.91	\$516.54	\$1,230.16	---	---	---	---	---	---
One Moody Plaza 17th Floor	Area 1	70	1,323.30	1,659.40	1,909.08	1,252.53	1,183.64	1,920.60	528.56	1,258.79	---	---	---	---	---	---
Galveston, TX 77550-7999	Female	75	1,519.67	1,905.65	2,192.38	1,438.40	1,359.29	2,205.61	607.01	1,445.59	---	---	---	---	---	---
Tel. No. (888)-350-1488		80	1,809.60	2,269.22	2,610.66	1,712.82	1,618.61	2,626.42	722.81	1,721.39	---	---	---	---	---	---
(409)-763-4661		85+	2,252.36	2,824.43	3,249.41	2,131.89	2,014.64	3,269.03	899.67	2,142.56	---	---	---	---	---	---
*Smoker rates are 1.1 times the rate of qualified	Standard	65-69	\$1,447.81	\$1,815.55	\$2,088.72	\$1,370.39	\$1,295.02	\$2,101.33	\$578.30	\$1,514.96	---	---	---	---	---	---
Non-Smokers	Area 1	70	1,502.06	1,883.57	2,166.97	1,421.72	1,343.53	2,180.05	599.97	1,571.72	---	---	---	---	---	---
Area 1 for Zip Codes (290-293, 296-297)	Male	75	1,755.00	2,200.76	2,531.90	1,661.15	1,569.79	2,547.17	701.01	1,836.41	---	---	---	---	---	---
Area 2 for Zip Codes (294-295, 298-299)		80	2,019.44	2,532.36	2,913.38	1,911.44	1,806.31	2,930.97	806.63	2,113.09	---	---	---	---	---	---
		85+	2,404.65	3,015.41	3,469.11	2,276.06	2,150.87	3,490.06	960.49	2,516.18	---	---	---	---	---	---
	Standard	65-69	\$1,508.73	\$1,891.93	\$2,176.59	\$1,428.03	\$1,349.49	\$2,189.73	\$602.63	\$1,435.18	---	---	---	---	---	---
	Area 2	70	1,543.85	1,935.97	2,227.26	1,461.29	1,380.92	2,240.70	616.65	1,468.58	---	---	---	---	---	---
	Female	75	1,772.95	2,223.26	2,557.78	1,678.13	1,585.84	2,573.21	708.17	1,686.52	---	---	---	---	---	---
		80	2,111.20	2,647.43	3,045.77	1,998.29	1,888.38	3,064.15	843.28	2,008.28	---	---	---	---	---	---
		85+	2,627.75	3,295.17	3,790.97	2,487.21	2,350.41	3,813.86	1,049.61	2,499.65	---	---	---	---	---	---

**MEDICARE SUPPLEMENT INSURANCE
ANNUAL PREMIUM RATES AS OF JANUARY 1, 2006
COMPILED BY SOUTH CAROLINA DEPARTMENT OF INSURANCE**

COMPANY NAME	ISSUE	ATTAINED							HIGH DEDUCTIBLE					HIGH DEDUCTIBLE		
	AGE	AGE	PLAN A	PLAN B	PLAN C	PLAN D	PLAN E	PLAN F	PLAN F	PLAN G	PLAN H	PLAN I	PLAN J	PLAN J	PLAN K	PLAN L
28. Continued	Standard	65-69	\$1,689.11	\$2,118.14	\$2,436.84	\$1,598.78	\$1,510.86	\$2,451.55	\$674.69	\$1,606.77	---	---	---	---	---	---
	Area 2	70	1,752.40	2,197.49	2,528.13	1,658.67	1,567.45	2,543.39	699.96	1,666.97	---	---	---	---	---	---
	Male	75	2,047.50	2,567.55	2,953.88	1,938.01	1,831.42	2,971.70	817.85	1,947.70	---	---	---	---	---	---
		80	2,356.01	2,954.42	3,398.94	2,230.01	2,107.36	3,419.46	941.06	2,241.16	---	---	---	---	---	---
		85+	2,805.42	3,517.97	4,047.30	2,655.40	2,509.35	4,071.73	1,120.57	2,668.68	---	---	---	---	---	---
	Select	65-69	---	---	\$1,449.44	\$983.03	---	\$1,464.08	---	\$992.85	---	---	---	---	---	---
	Area 1	70	---	---	1,483.18	1,005.91	---	1,498.16	---	1,015.97	---	---	---	---	---	---
	Female	75	---	---	1,703.28	1,155.18	---	1,720.49	---	1,166.73	---	---	---	---	---	---
		80	---	---	2,028.24	1,375.57	---	2,048.72	---	1,389.32	---	---	---	---	---	---
		85+	---	---	2,524.49	1,712.13	---	2,549.99	---	1,729.25	---	---	---	---	---	---
	Select	65-69	---	---	\$1,622.75	\$1,100.56	---	\$1,639.13	---	\$1,111.56	---	---	---	---	---	---
	Area 1	70	---	---	1,683.53	1,141.79	---	1,700.54	---	1,153.21	---	---	---	---	---	---
	Male	75	---	---	1,967.05	1,334.07	---	1,986.91	---	1,347.41	---	---	---	---	---	---
		80	---	---	2,263.43	1,535.08	---	2,286.29	---	1,550.43	---	---	---	---	---	---
		85+	---	---	2,695.18	1,827.90	---	2,722.40	---	1,846.18	---	---	---	---	---	---
	Select	65-69	---	---	\$1,691.01	\$1,146.86	---	\$1,708.09	---	\$1,158.33	---	---	---	---	---	---
	Area 2	70	---	---	1,730.38	1,173.56	---	1,747.85	---	1,185.29	---	---	---	---	---	---
	Female	75	---	---	1,987.16	1,347.71	---	2,007.23	---	1,361.19	---	---	---	---	---	---
		80	---	---	2,366.28	1,604.83	---	2,390.18	---	1,620.87	---	---	---	---	---	---
		85+	---	---	2,945.24	1,997.49	---	2,974.99	---	2,017.46	---	---	---	---	---	---
	Select	65-69	---	---	\$1,893.20	\$1,283.98	---	\$1,912.32	---	\$1,296.82	---	---	---	---	---	---
	Area 2	70	---	---	1,964.12	1,332.09	---	1,983.96	---	1,345.41	---	---	---	---	---	---
	Male	75	---	---	2,294.89	1,556.42	---	2,318.06	---	1,571.98	---	---	---	---	---	---
		80	---	---	2,640.67	1,790.92	---	2,667.34	---	1,808.84	---	---	---	---	---	---
		85+	---	---	3,144.37	2,132.55	---	3,176.13	---	2,153.88	---	---	---	---	---	---
29. STATE FARM MUTUAL	Territory 1	65	\$991.00	---	\$1,494.00	---	---	\$1,509.00	---	---	---	---	---	---	---	---
AUTOMOBILE INS CO		70	1,248.00	---	1,882.00	---	---	1,901.00	---	---	---	---	---	---	---	---
One State Farm Plaza		75	1,446.00	---	2,181.00	---	---	2,203.00	---	---	---	---	---	---	---	---
Bloomington, Illinois 61710-0001		80	1,624.00	---	2,450.00	---	---	2,475.00	---	---	---	---	---	---	---	---
Tel. No. -Contact Your Local State Farm Agent		85+	1,694.00	---	2,555.00	---	---	2,580.00	---	---	---	---	---	---	---	---
NOTE: Territory 1 all others									---	---	---	---	---	---	---	---
Territory 2 Berkeley, Charleston, Colleton, Dorchester, Georgetown	Territory 2	65	1,030.00	---	1,554.00	---	---	1,569.00	---	---	---	---	---	---	---	---
		70	1,298.00	---	1,958.00	---	---	1,977.00	---	---	---	---	---	---	---	---
		75	1,504.00	---	2,268.00	---	---	2,291.00	---	---	---	---	---	---	---	---
		80	1,689.00	---	2,548.00	---	---	2,574.00	---	---	---	---	---	---	---	---
		85+	1,762.00	---	2,657.00	---	---	2,683.00	---	---	---	---	---	---	---	---

**MEDICARE SUPPLEMENT INSURANCE
ANNUAL PREMIUM RATES AS OF JANUARY 1, 2006
COMPILED BY SOUTH CAROLINA DEPARTMENT OF INSURANCE**

COMPANY NAME	ISSUE	ATTAINED							HIGH DEDUCTIBLE					HIGH DEDUCTIBLE		
	AGE	AGE	PLAN A	PLAN B	PLAN C	PLAN D	PLAN E	PLAN F	PLAN F	PLAN G	PLAN H	PLAN I	PLAN J	PLAN J	PLAN K	PLAN L
30.STATE MUTUAL INS CO	Select	65	---	\$1,450.00	\$1,813.00	\$1,603.00	---	\$1,798.00	---	---	---	---	---	---	---	---
P.O. Box 153	Zip Code	70	---	2,031.00	2,477.00	2,249.00	---	2,458.00	---	---	---	---	---	---	---	---
Rome, GA 30162	299	75	---	2,400.00	2,893.00	2,662.00	---	2,871.00	---	---	---	---	---	---	---	---
Tel. No. 877-872-5500		80	---	2,683.00	3,213.00	2,979.00	---	3,188.00	---	---	---	---	---	---	---	---
		85	---	2,880.00	3,443.00	3,202.00	---	3,414.00	---	---	---	---	---	---	---	---
Notes: Select and Standard for Zip Code 299		90	---	3,052.00	3,633.00	3,396.00	---	3,598.00	---	---	---	---	---	---	---	---
Select and Standard for Zip Codes		95	---	3,174.00	3,765.00	3,526.00	---	3,732.00	---	---	---	---	---	---	---	---
294-295 & 298																
Select and Standard for Zip Codes	Select	65	---	\$1,305.00	\$1,632.00	\$1,443.00	---	\$1,618.00	---	---	---	---	---	---	---	---
All Except 290, 295 & 298-299	Zip Codes	70	---	1,828.00	2,229.00	2,024.00	---	2,212.00	---	---	---	---	---	---	---	---
There is a one time \$20 application fee.	290,295,	75	---	2,160.00	2,604.00	2,396.00	---	2,584.00	---	---	---	---	---	---	---	---
	298	80	---	2,415.00	2,892.00	2,681.00	---	2,869.00	---	---	---	---	---	---	---	---
		85	---	2,592.00	3,099.00	2,882.00	---	3,073.00	---	---	---	---	---	---	---	---
		90	---	2,747.00	3,270.00	3,056.00	---	3,238.00	---	---	---	---	---	---	---	---
		95	---	2,857.00	3,389.00	3,173.00	---	3,359.00	---	---	---	---	---	---	---	---
	Select	65	---	\$1,160.00	\$1,450.00	\$1,282.00	---	\$1,438.00	---	---	---	---	---	---	---	---
	All other	70	---	1,625.00	1,982.00	1,799.00	---	1,966.00	---	---	---	---	---	---	---	---
	Zip Codes	75	---	1,920.00	2,314.00	2,130.00	---	2,297.00	---	---	---	---	---	---	---	---
		80	---	2,146.00	2,570.00	2,383.00	---	2,550.00	---	---	---	---	---	---	---	---
		85	---	2,304.00	2,754.00	2,562.00	---	2,731.00	---	---	---	---	---	---	---	---
		90	---	2,442.00	2,906.00	2,717.00	---	2,878.00	---	---	---	---	---	---	---	---
		95	---	2,539.00	3,012.00	2,821.00	---	2,986.00	---	---	---	---	---	---	---	---
	Select	65	---	\$1,450.00	\$1,813.00	\$1,603.00	---	\$1,798.00	---	---	---	---	---	---	---	---
	Non-	70	---	1,722.00	2,103.00	1,906.00	---	2,087.00	---	---	---	---	---	---	---	---
	Tobacco	75	---	2,033.00	2,456.00	2,258.00	---	2,434.00	---	---	---	---	---	---	---	---
	Zip 299	80	---	2,277.00	2,726.00	2,528.00	---	2,704.00	---	---	---	---	---	---	---	---
		85	---	2,445.00	2,921.00	2,718.00	---	2,897.00	---	---	---	---	---	---	---	---
		90	---	2,588.00	3,077.00	2,880.00	---	3,053.00	---	---	---	---	---	---	---	---
		95	---	2,693.00	3,193.00	2,992.00	---	3,166.00	---	---	---	---	---	---	---	---
	Select	65	---	\$1,305.00	\$1,632.00	\$1,443.00	---	\$1,618.00	---	---	---	---	---	---	---	---
	Non-	70	---	1,550.00	1,893.00	1,715.00	---	1,878.00	---	---	---	---	---	---	---	---
	Tobacco	75	---	1,830.00	2,210.00	2,032.00	---	2,191.00	---	---	---	---	---	---	---	---
	Zip 290,	80	---	2,049.00	2,453.00	2,275.00	---	2,434.00	---	---	---	---	---	---	---	---
	295, 298	85	---	2,201.00	2,629.00	2,446.00	---	2,607.00	---	---	---	---	---	---	---	---
		90	---	2,329.00	2,769.00	2,592.00	---	2,748.00	---	---	---	---	---	---	---	---
		95	---	2,424.00	2,874.00	2,693.00	---	2,849.00	---	---	---	---	---	---	---	---

**MEDICARE SUPPLEMENT INSURANCE
ANNUAL PREMIUM RATES AS OF JANUARY 1, 2006
COMPILED BY SOUTH CAROLINA DEPARTMENT OF INSURANCE**

COMPANY NAME	ISSUE	ATTAINED							HIGH DEDUCTIBLE					HIGH DEDUCTIBLE		
	AGE	AGE	PLAN A	PLAN B	PLAN C	PLAN D	PLAN E	PLAN F	PLAN F	PLAN G	PLAN H	PLAN I	PLAN J	PLAN J	PLAN K	PLAN L
30. Continued	Select	65	----	\$1,160.00	\$1,450.00	\$1,282.00	----	\$1,438.00	-----	-----	-----	-----	-----	-----	-----	-----
	Non-	70	----	1,378.00	1,682.00	1,525.00	----	1,670.00	-----	-----	-----	-----	-----	-----	-----	-----
	Tobacco	75	----	1,626.00	1,965.00	1,806.00	----	1,947.00	-----	-----	-----	-----	-----	-----	-----	-----
	All other	80	----	1,822.00	2,181.00	2,022.00	----	2,163.00	-----	-----	-----	-----	-----	-----	-----	-----
	Zip Codes	85	----	1,956.00	2,337.00	2,174.00	----	2,318.00	-----	-----	-----	-----	-----	-----	-----	-----
		90	----	2,070.00	2,462.00	2,304.00	----	2,442.00	-----	-----	-----	-----	-----	-----	-----	-----
		95	----	2,154.00	2,554.00	2,394.00	----	2,533.00	-----	-----	-----	-----	-----	-----	-----	-----
	Standard	65	\$1,833.00	\$2,087.00	\$2,540.00	\$2,306.00	----	\$2,520.00	-----	-----	-----	-----	-----	-----	-----	-----
	Zip Code	70	2,533.00	2,920.00	3,472.00	3,233.00	----	3,442.00	-----	-----	-----	-----	-----	-----	-----	-----
	299	75	2,951.00	3,451.00	4,052.00	3,827.00	----	4,024.00	-----	-----	-----	-----	-----	-----	-----	-----
		80	3,239.00	3,859.00	4,505.00	4,285.00	----	4,468.00	-----	-----	-----	-----	-----	-----	-----	-----
		85	3,422.00	4,144.00	4,823.00	4,609.00	----	4,781.00	-----	-----	-----	-----	-----	-----	-----	-----
		90	3,603.00	4,387.00	5,091.00	4,880.00	----	5,044.00	-----	-----	-----	-----	-----	-----	-----	-----
		95	3,776.00	4,567.00	5,277.00	5,073.00	----	5,231.00	-----	-----	-----	-----	-----	-----	-----	-----
	Standard	65	\$1,650.00	\$1,878.00	\$2,286.00	\$2,075.00	----	\$2,268.00	-----	-----	-----	-----	-----	-----	-----	-----
	Zip Codes	70	2,280.00	2,628.00	3,125.00	2,910.00	----	3,098.00	-----	-----	-----	-----	-----	-----	-----	-----
	290, 295,	75	2,656.00	3,106.00	3,647.00	3,444.00	----	3,622.00	-----	-----	-----	-----	-----	-----	-----	-----
	298	80	2,915.00	3,473.00	4,055.00	3,857.00	----	4,021.00	-----	-----	-----	-----	-----	-----	-----	-----
		85	3,080.00	3,730.00	4,341.00	4,148.00	----	4,303.00	-----	-----	-----	-----	-----	-----	-----	-----
		90	3,243.00	3,948.00	4,582.00	4,392.00	----	4,540.00	-----	-----	-----	-----	-----	-----	-----	-----
		95	3,398.00	4,110.00	4,749.00	4,566.00	----	4,708.00	-----	-----	-----	-----	-----	-----	-----	-----
	Standard	65	\$1,466.00	\$1,670.00	\$2,032.00	\$1,845.00	----	\$2,016.00	-----	-----	-----	-----	-----	-----	-----	-----
	All other	70	2,026.00	2,336.00	2,778.00	2,586.00	----	2,754.00	-----	-----	-----	-----	-----	-----	-----	-----
	Zip Codes	75	2,361.00	2,761.00	3,242.00	3,062.00	----	3,219.00	-----	-----	-----	-----	-----	-----	-----	-----
		80	2,591.00	3,087.00	3,604.00	3,428.00	----	3,574.00	-----	-----	-----	-----	-----	-----	-----	-----
		85	2,738.00	3,315.00	3,858.00	3,687.00	----	3,825.00	-----	-----	-----	-----	-----	-----	-----	-----
		90	2,882.00	3,510.00	4,073.00	3,904.00	----	4,035.00	-----	-----	-----	-----	-----	-----	-----	-----
		95	3,021.00	3,654.00	4,222.00	4,058.00	----	4,185.00	-----	-----	-----	-----	-----	-----	-----	-----
	Standard	65	\$1,833.00	\$2,087.00	\$2,540.00	\$2,306.00	----	\$2,520.00	-----	-----	-----	-----	-----	-----	-----	-----
	Non-	70	2,149.00	2,475.00	2,944.00	2,741.00	----	2,923.00	-----	-----	-----	-----	-----	-----	-----	-----
	Tobacco	75	2,503.00	2,923.00	3,441.00	3,247.00	----	3,410.00	-----	-----	-----	-----	-----	-----	-----	-----
	Zip 299	80	2,748.00	3,275.00	3,821.00	3,632.00	----	3,788.00	-----	-----	-----	-----	-----	-----	-----	-----
		85	2,903.00	3,517.00	4,094.00	3,910.00	----	4,056.00	-----	-----	-----	-----	-----	-----	-----	-----
		90	3,055.00	3,722.00	4,314.00	4,142.00	----	4,280.00	-----	-----	-----	-----	-----	-----	-----	-----
		95	3,204.00	3,876.00	4,478.00	4,305.00	----	4,438.00	-----	-----	-----	-----	-----	-----	-----	-----

**MEDICARE SUPPLEMENT INSURANCE
ANNUAL PREMIUM RATES AS OF JANUARY 1, 2006
COMPILED BY SOUTH CAROLINA DEPARTMENT OF INSURANCE**

COMPANY NAME	ISSUE	ATTAINED							HIGH DEDUCTIBLE					HIGH DEDUCTIBLE		
	AGE	AGE	PLAN A	PLAN B	PLAN C	PLAN D	PLAN E	PLAN F	PLAN F	PLAN G	PLAN H	PLAN I	PLAN J	PLAN J	PLAN K	PLAN L
30. Continued	Standard	65	\$1,650.00	\$1,878.00	\$2,286.00	\$2,075.00	----	\$2,268.00	----	----	----	----	----	----	----	----
	Non-	70	1,934.00	2,228.00	2,650.00	2,467.00	----	2,631.00	----	----	----	----	----	----	----	----
	Tobacco	75	2,253.00	2,631.00	3,097.00	2,922.00	----	3,069.00	----	----	----	----	----	----	----	----
	Zip 290,	80	2,473.00	2,948.00	3,439.00	3,269.00	----	3,409.00	----	----	----	----	----	----	----	----
	295,298	85	2,613.00	3,165.00	3,685.00	3,519.00	----	3,650.00	----	----	----	----	----	----	----	----
		90	2,750.00	3,350.00	3,883.00	3,728.00	----	3,852.00	----	----	----	----	----	----	----	----
		95	2,884.00	3,488.00	4,030.00	3,875.00	----	3,994.00	----	----	----	----	----	----	----	----
	Standard	65	\$1,466.00	\$1,670.00	\$2,032.00	\$1,845.00	----	\$2,016.00	----	----	----	----	----	----	----	----
	Non-	70	1,719.00	1,980.00	2,355.00	2,193.00	----	2,338.00	----	----	----	----	----	----	----	----
	Tobacco	75	2,002.00	2,338.00	2,753.00	2,598.00	----	2,728.00	----	----	----	----	----	----	----	----
	All other	80	2,198.00	2,620.00	3,057.00	2,906.00	----	3,030.00	----	----	----	----	----	----	----	----
	Zip Codes	85	2,322.00	2,814.00	3,275.00	3,128.00	----	3,245.00	----	----	----	----	----	----	----	----
		90	2,444.00	2,978.00	3,451.00	3,314.00	----	3,424.00	----	----	----	----	----	----	----	----
		95	2,563.00	3,101.00	3,582.00	3,444.00	----	3,550.00	----	----	----	----	----	----	----	----
31. STERLING LIFE INS CO	Standard	Under 65	\$3,748.42	----	----	----	----	\$4,804.80	----	----	----	----	----	----	----	----
P.O. BOX 5348	Area 1	65-69	2,306.95	2,867.73	3,228.72	----	----	3,235.43	----	----	----	----	----	----	----	----
Bellingham, WA 98227		70-74	2,671.29	3,361.36	3,809.65	----	----	3,821.40	----	----	----	----	----	----	----	----
Tel. No. (800) 688-0010		75-79	2,906.35	3,713.95	4,303.28	----	----	4,315.03	----	----	----	----	----	----	----	----
		80+	3,070.89	4,017.85	4,880.85	----	----	4,894.29	----	----	----	----	----	----	----	----
Annual Premiums applicable to Rate Area 1																
Select plans are available in the following counties:	Standard	65-69	----	----	----	----	----	----	----	\$1,730.57	----	----	----	----	----	----
	Area 1	70-74	----	----	----	----	----	----	----	2,048.84	----	----	----	----	----	----
Anderson-Zip Codes 29611, 29621, 29622, 29623, 29624, 29625, 29626, 29627, 29630, 29642, 29643, 29654, 29656, 29669, 29670, 29673, 29677, 29684, 29689, 29697,	Tobacco	75-79	----	----	----	----	----	----	----	2,332.30	----	----	----	----	----	----
		80+	----	----	----	----	----	----	----	2,656.37	----	----	----	----	----	----
Greenville- All zip codes within Greenville County	Standard	65-69	----	----	----	----	----	----	----	\$1,489.09	----	----	----	----	----	----
	Area 1	70-74	----	----	----	----	----	----	----	1,762.96	----	----	----	----	----	----
	Non-Tobacco	75-79	----	----	----	----	----	----	----	2,006.86	----	----	----	----	----	----
		80+	----	----	----	----	----	----	----	2,285.72	----	----	----	----	----	----
Pickens- All zip codes within Pickens County	Select	65-69	\$1,718.28	\$1,751.58	\$2,040.62	----	----	\$2,045.95	----	----	----	----	----	----	----	----
Spartanburg- Zip codes 29301, 29302, 29303, 29304, 29305, 29306, 29307, 29316, 29318, 29319, 29320, 29322, 29333, 29334, 29335, 29336, 29338, 29348, 29349, 29356, 29365, 29369, 29374, 29375, 29376, 29377, 29378, 29385, 29388, 29390, 29391, 29612, 29651, 29698.	Area 1	70-74	1,986.01	2,036.63	2,385.61	----	----	2,392.27	----	----	----	----	----	----	----	----
		75-79	2,157.84	2,228.44	2,665.33	----	----	2,673.32	----	----	----	----	----	----	----	----
		80+	2,276.39	2,372.29	2,978.35	----	----	2,987.68	----	----	----	----	----	----	----	----
	Select	65-69	----	----	----	----	----	----	----	\$1,411.48	----	----	----	----	----	----
	Area 1	70-74	----	----	----	----	----	----	----	1,629.70	----	----	----	----	----	----
	Tobacco	75-79	----	----	----	----	----	----	----	1,799.55	----	----	----	----	----	----
		80+	----	----	----	----	----	----	----	1,943.60	----	----	----	----	----	----
	Select	65-69	----	----	----	----	----	----	----	\$1,214.53	----	----	----	----	----	----
	Area 1	70-74	----	----	----	----	----	----	----	1,402.30	----	----	----	----	----	----
	Non-Tobacco	75-79	----	----	----	----	----	----	----	1,548.45	----	----	----	----	----	----
		80+	----	----	----	----	----	----	----	1,672.40	----	----	----	----	----	----

**MEDICARE SUPPLEMENT INSURANCE
ANNUAL PREMIUM RATES AS OF JANUARY 1, 2006
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COMPANY NAME	ISSUE	ATTAINED							HIGH DEDUCTIBLE					HIGH DEDUCTIBLE		
	AGE	AGE	PLAN A	PLAN B	PLAN C	PLAN D	PLAN E	PLAN F	PLAN F	PLAN G	PLAN H	PLAN I	PLAN J	PLAN J	PLAN K	PLAN L
31. Continued	Standard	Under 65	\$3,748.42	----	----	----	----	\$4,804.80	-----	-----	-----	-----	-----	-----	-----	-----
	Area 2	65-69	\$2,196.13	\$2,785.46	\$3,107.83	----	----	3,116.22	-----	-----	-----	-----	-----	-----	-----	-----
		70-74	2,543.69	3,263.98	3,670.29	----	----	3,678.69	-----	-----	-----	-----	-----	-----	-----	-----
Annual Premiums applicable to Rate Area II		75-79	2,768.67	3,606.49	4,143.77	----	----	4,155.53	-----	-----	-----	-----	-----	-----	-----	-----
Select Plans are available in the following counties:		80+	2,924.82	3,900.32	4,702.88	----	----	4,712.95	-----	-----	-----	-----	-----	-----	-----	-----
Abbeville-Zip Codes 29638, 29645, 29654, 29692	Standard	65-69	----	----	----	----	----	----	-----	\$1,741.69	-----	-----	-----	-----	-----	-----
	Area 2	70-74	----	----	----	----	----	----	-----	2,066.89	-----	-----	-----	-----	-----	-----
Laurens- Zop Codes 29360, 29644, 29645, 29654, 29688, 29692	Tobacco	75-79	----	----	----	----	----	----	-----	2,359.35	-----	-----	-----	-----	-----	-----
		80+	----	----	----	----	----	----	-----	2,699.57	-----	-----	-----	-----	-----	-----
Oconee-All zip codes within Oconee County	Standard	65-69	----	----	----	----	----	----	-----	\$1,498.67	-----	-----	-----	-----	-----	-----
	Area 2	70-74	----	----	----	----	----	----	-----	1,778.49	-----	-----	-----	-----	-----	-----
	Non-Tobacco	75-79	----	----	----	----	----	----	-----	2,030.14	-----	-----	-----	-----	-----	-----
		80+	----	----	----	----	----	----	-----	2,322.88	-----	-----	-----	-----	-----	-----
	Select	65-69	\$1,719.61	\$1,884.78	\$2,148.52	----	----	\$2,153.84	-----	-----	-----	-----	-----	-----	-----	-----
	Area 2	70-74	1,987.34	2,189.81	2,512.15	----	----	2,518.81	-----	-----	-----	-----	-----	-----	-----	-----
		75-79	2,160.50	2,393.60	2,806.52	----	----	2,814.52	-----	-----	-----	-----	-----	-----	-----	-----
		80+	2,277.72	2,550.78	3,136.86	----	----	3,144.85	-----	-----	-----	-----	-----	-----	-----	-----
	Select	65-69	----	----	----	----	----	----	-----	\$1,497.45	-----	-----	-----	-----	-----	-----
	Area 2	70-74	----	----	----	----	----	----	-----	1,745.90	-----	-----	-----	-----	-----	-----
	Tobacco	75-79	----	----	----	----	----	----	-----	1,951.44	-----	-----	-----	-----	-----	-----
		80+	----	----	----	----	----	----	-----	2,154.10	-----	-----	-----	-----	-----	-----
	Select	65-69	----	----	----	----	----	----	-----	\$1,288.50	-----	-----	-----	-----	-----	-----
	Area 2	70-74	----	----	----	----	----	----	-----	1,502.29	-----	-----	-----	-----	-----	-----
	Non-Tobacco	75-79	----	----	----	----	----	----	-----	1,679.15	-----	-----	-----	-----	-----	-----
		80+	----	----	----	----	----	----	-----	1,853.53	-----	-----	-----	-----	-----	-----
32. UNITED AMERICAN INS CO	<65		\$2,487.00	\$3,150.00	----	----	----	----	-----	-----	-----	-----	-----	-----	-----	-----
3700 S. Stonebridge Drive	65		\$1,399.00	\$1,648.00	\$1,864.00	\$1,768.00	----	\$2,536.00	\$674.00	\$2,425.00	-----	-----	-----	-----	-----	-----
P.O. Box 8080	70		1,508.00	2,177.00	2,461.00	2,354.00	----	2,780.00	889.00	2,667.00	-----	-----	-----	-----	-----	-----
McKinney, Texas 75070	75		1,508.00	2,365.00	2,710.00	2,603.00	----	2,887.00	983.00	2,774.00	-----	-----	-----	-----	-----	-----
Customer Service Tel. No. (800) 331-2512	80+		1,508.00	2,390.00	2,872.00	2,767.00	----	2,960.00	1,058.00	2,843.00	-----	-----	-----	-----	-----	-----

**MEDICARE SUPPLEMENT INSURANCE
ANNUAL PREMIUM RATES AS OF JANUARY 1, 2006
COMPILED BY SOUTH CAROLINA DEPARTMENT OF INSURANCE**

COMPANY NAME	ISSUE	ATTAINED							HIGH DEDUCTIBLE						HIGH DEDUCTIBLE		
															PLAN J		
33. UNITED HEALTHCARE INS CO	Area 1	65*	\$1,045.44	\$1,209.72	\$1,414.44	\$1,320.00	\$1,320.00	\$1,423.44	----	\$1,329.00	\$1,500.00	\$1,509.00	\$1,542.72	----	----	----	
AARP Division	Preferred	68+**	1,551.00	1,791.84	2,092.20	1,953.60	1,953.60	2,105.40	----	1,966.80	2,217.60	2,230.80	2,280.24	----	----	----	
Post Office Box 130	Universal	68+***	2,115.00	2,443.44	2,853.00	2,664.00	2,664.00	2,871.00	----	2,682.00	3,024.00	3,042.00	3,109.44	----	----	----	
Montgomeryville, Pennsylvania 18936																	
Customer Service Tel. No. (800) 523-5800																	
	Area 2	65*	\$987.00	\$1,142.16	\$1,335.72	\$1,245.72	\$1,245.72	\$1,344.72	----	\$1,254.72	\$1,414.44	\$1,425.72	\$1,457.16	----	----	----	
Plans A through J are available to persons 65 and older.	Preferred	68+**	1,465.20	1,692.84	1,976.64	1,844.64	1,844.64	1,989.84	----	1,857.84	2,092.20	2,108.64	2,154.84	----	----	----	
Please contact our Toll-Free Customer Service Number	Universal	68+***	1,998.00	2,308.44	2,695.44	2,515.44	2,515.44	2,713.44	----	2,533.44	2,853.00	2,875.44	2,938.44	----	----	----	
to determine your specific rate and eligibility for any applicable discounts.																	
	Area 3	65*	\$899.16	\$1,041.00	\$1,216.44	\$1,135.44	\$1,135.44	\$1,225.44	----	\$1,142.16	\$1,288.44	\$1,297.44	\$1,326.72	----	----	----	
Notes- Plans H, I, J rates exclude the drug benefit.	Preferred	68+**	1,336.44	1,544.40	1,801.80	1,683.00	1,683.00	1,815.00	----	1,692.84	1,907.40	1,920.60	1,963.44	----	----	----	
*Age 65 premiums are for persons applying for coverage within three years of their Medicare Part B effective date or 65th Birthday. Rates include discounts for Spouse, Electronic Funds Transfer, and Early Enrollment Discount Program.	Universal	68+***	1,822.44	2,106.00	2,457.00	2,295.00	2,295.00	2,475.00	----	2,308.44	2,601.00	2,619.00	2,677.44	----	----	----	
** Age 68+ (Preferred) rates are for individuals applying more than 3 years after their Medicare Part B effective date and 65th Birthday who meet underwriting requirements.																	
*** Age 68+ (Universal) rates are for individuals applying more than 3 years after their Medicare Part B effective date and 65th Birthday who do not meet underwriting requirements.																	
34. UNITED TEACHER ASSOC INS CO	Area 1	65-67	\$925.50	\$1,112.38	\$1,269.76	\$1,056.05	----	\$1,274.24	----	\$1,059.63	----	----	----	----	----	----	
5508 Parkcrest Drive	Non-Smoker	70	1,049.79	1,265.29	1,448.60	1,205.38	----	1,453.97	----	1,209.85	----	----	----	----	----	----	
Austin, Texas 78731	Male	75	1,240.26	1,512.09	1,739.22	1,451.29	----	1,745.48	----	1,456.65	----	----	----	----	----	----	
Tel. No. (800) 880-8824		80	1,369.91	1,693.61	1,957.40	1,643.54	----	1,964.56	----	1,648.90	----	----	----	----	----	----	
Notes: Area 1 for Zip Codes 290-293, 296-297	Area 1	65-67	\$804.78	\$967.52	\$1,104.34	\$918.34	----	\$1,107.91	----	\$921.03	----	----	----	----	----	----	
Area 2 for Zip Codes 294-295, 298-299	Non-Smoker	70	912.98	1,100.76	1,259.93	1,048.00	----	1,264.40	----	1,051.58	----	----	----	----	----	----	
	Female	75	1,078.41	1,314.47	1,512.09	1,262.61	----	1,517.46	----	1,267.08	----	----	----	----	----	----	
Add one time enrollment fee of \$25		80	1,191.07	1,472.75	1,702.56	1,428.93	----	1,707.92	----	1,433.40	----	----	----	----	----	----	
	Area 1	65-67	\$1,156.20	\$1,390.48	\$1,587.21	\$1,319.84	----	\$1,592.57	----	\$1,324.31	----	----	----	----	----	----	
	Smoker	70	1,312.69	1,581.84	1,810.76	1,506.73	----	1,817.01	----	1,512.09	----	----	----	----	----	----	
	Male	75	1,550.54	1,889.44	2,173.80	1,814.33	----	2,181.85	----	1,820.59	----	----	----	----	----	----	
		80	1,712.39	2,117.47	2,446.53	2,053.98	----	2,455.47	----	2,061.13	----	----	----	----	----	----	

**MEDICARE SUPPLEMENT INSURANCE
ANNUAL PREMIUM RATES AS OF JANUARY 1, 2006
COMPILED BY SOUTH CAROLINA DEPARTMENT OF INSURANCE**

COMPANY NAME	ISSUE	ATTAINED							HIGH DEDUCTIBLE					HIGH DEDUCTIBLE		
	AGE	AGE	PLAN A	PLAN B	PLAN C	PLAN D	PLAN E	PLAN F	PLAN F	PLAN G	PLAN H	PLAN I	PLAN J	PLAN J	PLAN K	PLAN L
34. Continued	Area 1	65-67	\$1,005.98	\$1,208.96	\$1,379.75	\$1,148.15	----	\$1,385.12	----	\$1,151.73	----	----	----	----	----	----
	Smoker	70	1,141.00	1,375.28	1,574.69	1,310.00	----	1,580.05	----	1,314.47	----	----	----	----	----	----
	Female	75	1,348.45	1,643.54	1,890.34	1,578.26	----	1,897.49	----	1,593.63	----	----	----	----	----	----
		80	1,488.84	1,841.16	2,127.30	1,785.72	----	2,135.35	----	1,791.98	----	----	----	----	----	----
	Area 2	65-67	\$1,034.38	\$1,243.25	\$1,419.15	\$1,180.29	----	\$1,424.15	----	\$1,184.29	----	----	----	----	----	----
	Non-Smoker	70	1,173.30	1,414.15	1,619.03	1,347.19	----	1,625.02	----	1,352.19	----	----	----	----	----	----
	Male	75	1,386.17	1,689.99	1,943.83	1,622.03	----	1,950.83	----	1,628.02	----	----	----	----	----	----
		80	1,531.08	1,892.86	2,187.69	1,836.90	----	2,195.68	----	1,842.89	----	----	----	----	----	----
	Area 2	65-67	\$899.46	\$1,081.35	\$1,234.26	\$1,026.38	----	\$1,238.26	----	\$1,029.38	----	----	----	----	----	----
	Non-Smoker	70	1,020.39	1,230.26	1,408.15	1,171.30	----	1,413.15	----	1,175.29	----	----	----	----	----	----
	Female	75	1,205.28	1,469.12	1,689.99	1,411.15	----	1,695.98	----	1,416.15	----	----	----	----	----	----
		80	1,331.20	1,646.01	1,902.86	1,597.04	----	1,908.85	----	1,602.04	----	----	----	----	----	----
	Area 2	65-67	\$1,292.22	\$1,554.07	\$1,773.94	\$1,475.11	----	\$1,779.93	----	\$1,480.11	----	----	----	----	----	----
	Smoker	70	1,467.12	1,767.94	2,023.79	1,683.99	----	2,030.78	----	1,689.99	----	----	----	----	----	----
	Male	75	1,732.96	2,111.73	2,429.54	2,027.78	----	2,438.54	----	2,034.78	----	----	----	----	----	----
		80	1,913.85	2,366.58	2,734.36	2,295.62	----	2,744.35	----	2,303.62	----	----	----	----	----	----
	Area 2	65-67	\$1,124.33	\$1,351.19	\$1,542.07	\$1,283.23	----	\$1,548.07	----	\$1,287.23	----	----	----	----	----	----
	Smoker	70	1,275.23	1,537.08	1,759.94	1,464.12	----	1,765.94	----	1,469.12	----	----	----	----	----	----
	Female	75	1,507.10	1,836.90	2,112.73	1,763.94	----	2,120.73	----	1,769.94	----	----	----	----	----	----
		80	1,664.00	2,057.76	2,377.57	1,995.80	----	2,386.57	----	2,002.80	----	----	----	----	----	----
35. United World Life Insurance Company	Area 1	65	\$743.55	911.36	----	----	----	\$1,020.57	----	\$971.91	----	----	----	----	----	----
Mutual of Omaha Plaza		70	845.18	1,035.94	----	----	----	1,160.06	----	1,104.73	----	----	----	----	----	----
Omaha, Nebraska 68175		75	983.23	1,205.18	----	----	----	1,349.65	----	1,285.22	----	----	----	----	----	----
Tel. No. (402) 342-7600		80+	1,072.23	1,314.27	----	----	----	1,471.81	----	1,401.64	----	----	----	----	----	----
(877) 845-0892																
Note: Standard rates are approximately 15% higher.	Area 2	65	\$815.84	999.97	----	----	----	\$1,119.79	----	\$1,066.41	----	----	----	----	----	----
Area 1 for Zip Codes 290-293, 296 & 297		70	927.35	1,136.66	----	----	----	1,272.84	----	1,212.14	----	----	----	----	----	----
Area 2 for Zip Codes 294-295, 298-299		75	1,078.82	1,322.36	----	----	----	1,480.86	----	1,410.18	----	----	----	----	----	----
		80+	1,176.47	1,442.04	----	----	----	1,614.90	----	1,537.91	----	----	----	----	----	----
36. USAA LIFE INS CO	Nonsmoker	65-69	\$1,034.28	----	----	\$1,444.32	----	\$1,479.00	----	\$1,397.40	----	----	----	----	----	----
9800 Fredericksburg Road (F2E)		70-74	1,138.32	----	----	1,603.44	----	1,632.00	----	1,544.28	----	----	----	----	----	----
San Antonio, TX 78288		75-79	1,230.12	----	----	1,723.80	----	1,758.48	----	1,660.56	----	----	----	----	----	----
Tel. No. (800) 531-8000		80-84	1,301.52	----	----	1,829.88	----	1,864.56	----	1,764.60	----	----	----	----	----	----
		85+	1,381.08	----	----	1,940.04	----	1,978.80	----	1,872.72	----	----	----	----	----	----
	Smoker	00-69	\$1,136.28	----	----	\$1,591.20	----	\$1,629.96	----	\$1,540.20	----	----	----	----	----	----
		70-74	1,250.52	----	----	1,762.56	----	1,797.24	----	1,679.28	----	----	----	----	----	----
		75-79	1,350.48	----	----	1,897.20	----	1,933.92	----	1,827.84	----	----	----	----	----	----
		80-84	1,432.08	----	----	2,015.52	----	2,050.20	----	1,944.12	----	----	----	----	----	----
		85+	1,521.84	----	----	2,133.84	----	2,178.72	----	2,060.40	----	----	----	----	----	----